

Michigan Response & Resource Handbook

SAFE DELIVERY OF NEWBORNS





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This *Response and Resource Handbook* has been prepared by the Michigan Public Health Institute to offer emergency service providers the tools and information necessary to ensure a successful surrender under the Safe Delivery of Newborns law. The Children's Trust Fund has generously funded the development and the initial distribution of the handbook.

This handbook is not intended to take the place of a full agency or legal review of policies and procedures.

Copies of the *Response and Resource Handbook* are available by contacting the Michigan Public Health Institute (MPHI) at 517-324-7330 or by writing to MPHI, Child & Adolescent Health, 2438 Woodlake Circle, Suite 240, Okemos, MI 48864. Updates for any sections of the *Response and Resource Handbook* that are made following the initial distribution will automatically be sent out to those agencies that have ordered a copy of the handbook. Additionally, the *Response and Resource Handbook* is available on the Safe Delivery Web site at www.michigan.gov/dhs.



Safe Delivery of Newborns Law

In 2000, infant abandonment was identified as an increasing problem throughout Michigan when stories of newborn babies abandoned in public places such as trash bins, car washes, along the side of the road or on steps of a church, were being reported by the media. These incidents typically involved young women or girls who were in a state of denial and/or panicked about the pregnancy. Responding to this increase in infant abandonment, Michigan law makers enacted the Safe Delivery of Newborns law (effective January 1, 2001) which:

- Focuses on educating the parent(s) that there are safe choices and protecting the newborn from harm or possible death.
- Creates an affirmative defense for the parent(s) to surrender an unwanted newborn to an emergency service provider (ESP) within 72 hours of birth anonymously or with assurances of confidentiality.
- Defines an ESP as a uniformed or otherwise identified employee or contractor of a fire department, hospital, or police station that is inside the building and on duty.

SAFE DELIVERY IS NOT INTENDED TO BE A SUBSTITUTE FOR RELEASING A CHILD FOR ADOPTION UNDER MICHIGAN'S ADOPTION CODE.



RESPONSE AND RESOURCE HANDBOOK

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AGENCY RESPONSE



SAFE DELIVERY OF NEWBORNS

Agency Response



The Agency Response section is provided to encourage each agency to develop their specific response action plan in the event of a Safe Delivery surrender of a newborn. The Readiness Checklist will serve as a guide in developing this plan. Each agency should complete the provided Local Response and Contact Sheet with pertinent local resources to ensure preparedness.



SAFE DELIVERY OF NEWBORNS

READINESS CHECKLIST ARE YOU READY?

Below you will find a checklist of policies and procedures you should have in place to effectively respond to a safe delivery surrender.

FACILITY

- ☐ Staff available on site.

Considerations:

- ☐ If doors are locked, surrendering parent(s) must be able to access/communicate with an emergency service provider (ESP) in order to have a face-to-face surrender of the baby.
- ☐ If staff are dispatched out of the building, a contingency plan should be in place in the event of a surrender.

POLICY

- ☐ Agency has a written policy and/or Standard Operating Guideline (SOG).

Considerations:

- ☐ Safe delivery information is readily available to all staff.
- ☐ Staff are trained on the law and agency policy.
- ☐ Local contact information, including phone numbers, is included.
- ☐ Documents to give to parent(s) are readily accessible.

If there is no policy or SOG:

- ☐ See model policy and guidelines in the *Response and Resource Handbook** for developing policy.
- ☐ Additional information is available by calling 517-324-7330 or visiting the Web site www.michigan.gov/dhs.

TRAINING

- ☐ A formal plan for training is in place for all employees.

Considerations:

- ☐ Plan to review policy on an annual basis with all staff.
- ☐ Information is included for the orientation of all new staff.
- ☐ A training Web site will be available in 2006 and may be linked through www.michigan.gov/dhs.

RESOURCES

- ☐ A designated staff person is assigned to ensure the facility is prepared for a surrender.
- ☐ Source of documents and how to replenish inventory is known.
- ☐ A response to media inquiries is in place.*
- ☐ Local private adoption agencies willing to place the newborns have been identified (applies to hospital only).*

When readiness checklist is complete, your agency is ready to accept a Safe Delivery. If you have questions, you may call the Safe Delivery professional hotline at 517-324-7330 (M-F 8a-5p).

* Michigan Safe Delivery of Newborns *Response and Resource Handbook* contains information to assist in an agency's preparation for accepting a surrendered newborn. More information is available by calling 517-324-7330 or going to Web site www.michigan.gov/dhs.



SAFE DELIVERY OF NEWBORNS



MICHIGAN SAFE DELIVERY OF NEWBORNS LOCAL RESPONSE AND CONTACT SHEET

Your agency should identify this information prior to a surrender.

Local Hospital Contact Information:

Adoption Agency Contact Information:

Children's Protective Services Contact Information:

Emergency Service Provider Agency Coordinator Contact Information:

Professional Hotline Number (M-F 8a-5p): 1-517-324-7330

Public Hotline Number (24/7): 1-866-733-7733



FREQUENTLY ASKED QUESTIONS

NOTE: A complete list of questions and answers can be found in the *Response and Resource Handbook* Education and Training section

1. **WHEN DID THIS LAW TAKE EFFECT?**
2. **IN GENERAL, WHAT DOES THE LAW PROVIDE?**
3. **WHO IS AN EMERGENCY SERVICE PROVIDER (ESP)?**
4. **EMERGENCY MEDICAL SERVICE (EMS) AGENCIES ARE NOT MENTIONED IN THE LAW, BUT ARE JUST AS LIKELY TO RECEIVE A NEWBORN AS A FIRE DEPARTMENT. WHAT IS THEIR PROCESS?**
5. **WHAT WRITTEN INFORMATION IS THE ESP TO PROVIDE THE SURRENDERING PARENT(S)?**
6. **WHAT OTHER INFORMATION SHOULD THE ESP SHARE?**
7. **WHERE DOES AN ESP OBTAIN A LISTING OF COUNSELING AND MEDICAL SERVICE PROVIDERS?**
8. **HOW DOES THE ESP KNOW IF THE BABY IS A NEWBORN?**
9. **WHAT IF THE PERSON(S) SURRENDERING THE NEWBORN LEAVES WITHOUT PROVIDING ANY ADDITIONAL INFORMATION?**
10. **WHAT IF SOMEONE OTHER THAN A PARENT SURRENDERS THE NEWBORN?**
11. **HOW WILL THE NON-SURRENDERING PARENT KNOW ABOUT THE BIRTH AND THE SURRENDER OF THE BABY?**
12. **WHAT IF THE NEWBORN IS FOUND ABANDONED ON THE HOSPITAL, FIRE DEPARTMENT OR POLICE STATION PREMISES?**
13. **WHAT IF THE PARENT(S) RETURNS TO THE HOSPITAL, FIRE DEPARTMENT OR POLICE STATION FOLLOWING SURRENDER AND REQUESTS THE RETURN OF THE NEWBORN?**
14. **WHAT CIRCUIT COURT, FAMILY DIVISION DOES THE SURRENDERING PARENT(S) FILE FOR CUSTODY IF, AFTER SURRENDER, THEY WISH TO DO SO?**
15. **I AM AN ESP, ARE THERE OPERATING GUIDELINES AVAILABLE FOR REVIEW?**
16. **THE LAW INDICATES THAT THE NEWBORN SURRENDERED AT A FIRE DEPARTMENT OR POLICE STATION MUST BE TRANSFERRED TO THE HOSPITAL. HOW SHOULD THIS BE DONE?**
17. **HOW ARE FIRE AND POLICE PERSONNEL TO TRANSPORT A SURRENDERED NEWBORN TO THE HOSPITAL?**
18. **SHOULD THE INITIAL CLINICAL ASSESSMENT OF THE NEWBORN, AT THE HOSPITAL, INCLUDE A COMPLETE PHYSICAL EXAMINATION?**
19. **WHAT SHOULD BE DONE IF, DURING THE HOSPITAL'S CLINICAL ASSESSMENT, SIGNS OF ABUSE AND/OR NEGLECT ARE PRESENT?**
20. **DOES THE HOSPITAL HAVE TO OBTAIN WRITTEN CONSENT TO TREAT AND/OR TRANSFER THE NEWBORN?**



FREQUENTLY ASKED QUESTIONS

21. IS IT LEGALLY RISKY FOR ESP TO ACCEPT THESE SURRENDERED NEWBORNS?
22. IS IT LEGALLY RISKY FOR A PARENT(S) TO SURRENDER A NEWBORN TO AN ESP?
23. WILL THE SURRENDERED NEWBORN BE ELIGIBLE FOR MEDICAID?
24. DOES THE NEW LAW AUTHORIZE APPROPRIATIONS SO THE ESP, PHYSICIANS AND OTHER CAREGIVERS ARE PAID FOR SERVICES RENDERED PURSUANT TO THIS LAW?
25. WHO APPLIES FOR THE BIRTH REGISTRATION FOR THE NEWBORN?
26. FOLLOWING AN EXAMINATION AT A HOSPITAL AND IF THE NEWBORN IS UNHARMED, WHAT IS THE NEXT STEP FOR THE HOSPITAL?
27. WHERE DOES THE HOSPITAL OBTAIN A LISTING OF CHILD PLACING AGENCIES THAT HANDLE ADOPTIONS?
28. WHAT ARE THE RESPONSIBILITIES OF A CHILD PLACING AGENCY THAT HAS TAKEN A NEWBORN UNDER THIS LAW?
29. WHAT ARE THE LISTINGS FOR THE MICHIGAN MISSING CHILDREN'S INFORMATION CLEARINGHOUSE AND THE NATIONAL CENTER FOR MISSING AND EXPLOITED CHILDREN?
30. THE CHILD PLACING AGENCY ASSUMING TEMPORARY PROTECTIVE CUSTODY OF THE NEWBORN MUST SUPPLY THE INFORMATION NECESSARY TO ESTABLISH A BIRTH REGISTRATION FOR THE CHILD, EXCEPT FOR NEWBORNS SURRENDERED FOLLOWING A HOSPITAL BIRTH. IS THERE A FORM AVAILABLE THAT CAN BE USED FOR THIS PURPOSE?
31. THE CHILD PLACING AGENCY THAT HAS TEMPORARY PROTECTIVE CUSTODY OF A NEWBORN UNDER THE SAFE DELIVERY ACT WILL BE REQUIRED TO COMPLETE COURT FORMS. WHAT FORMS HAVE BEEN DEVELOPED AND HOW DOES THE AGENCY ACCESS THEM?
32. A CHILD PLACING AGENCY THAT HAS TEMPORARY PROTECTIVE CUSTODY OF A NEWBORN UNDER THE SAFE DELIVERY ACT IS REQUIRED TO, WITHIN 28 DAYS, MAKE REASONABLE EFFORTS TO IDENTIFY AND LOCATE THE NON-SURRENDERING PARENT. IF THE IDENTITY AND ADDRESS OF THAT PARENT IS UNKNOWN, THE AGENCY IS TO PROVIDE NOTICE BY PUBLICATION IN A NEWSPAPER OF GENERAL CIRCULATION IN THE COUNTY WHERE THE NEWBORN WAS SURRENDERED. HOW WOULD SUCH A PUBLICATION READ?
33. WHERE CAN I GET MORE INFORMATION ABOUT THE SAFE DELIVERY LAW?
34. WHAT STEPS IS THE CHILD PLACING AGENCY WITH TEMPORARY PROTECTIVE CUSTODY OF THE NEWBORN EXPECTED TO TAKE TO NOTIFY THE DEPARTMENT OF HUMAN SERVICES OF A SAFE DELIVERY OF NEWBORNS PLACEMENT?



SAFE DELIVERY OF NEWBORNS

Parent Packet Description



Pocket holders containing critical information for the surrendering parent(s) can be found in the back of the *Response and Resource Handbook*.

It is important that the emergency service provider make a reasonable effort to give the surrendering parent(s) at least one, preferably both, of these publications before leaving the building.

- Surrendering Parent Rights (DHS Pub 866)
- Safe Delivery Program FACT Sheet (DHS Pub 867)

The emergency service provider must make a reasonable attempt to obtain the child's family medical history with the understanding that the surrendering parent(s) may still remain anonymous. Completion of the family medical history is very important for the current and future health needs of the child. The voluntary release form is used in court proceedings to verify the parent intent to release parental rights. The following forms may be used to gather this information:

- Voluntary Medical Background Form for a Surrendered Newborn (DHS Form 4819)
- Voluntary Release For Adoption of a Surrendered Newborn by Parent (DHS Form 4820)

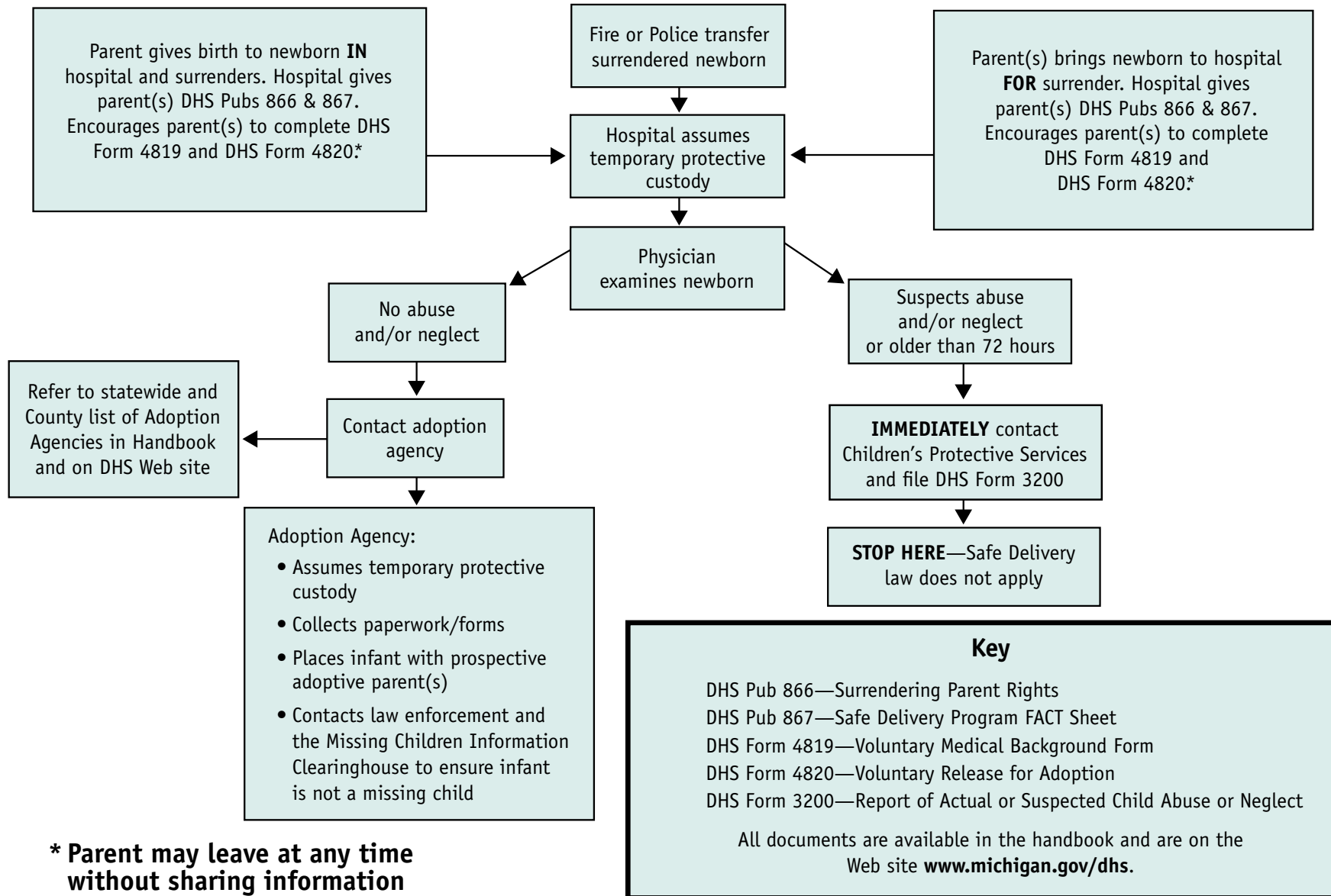


HOSPITAL RESPONSE



Safe Delivery Hospital Flowchart

(Emergency Service Provider Responsibilities)



*** Parent may leave at any time without sharing information**



SAFE DELIVERY SURRENDER CHECKLIST

FOR HOSPITAL EMERGENCY SERVICE PROVIDERS (PARENT GIVES BIRTH TO NEWBORN IN HOSPITAL AND SURRENDERS)

- ☐ Accept temporary protective custody of the newborn.
- ☐ Make a reasonable effort to give the surrendering parent(s):
 - Surrendering Parent Rights (DHS Pub 866)
 - Safe Delivery Program FACT Sheet (DHS Pub 867)
- ☐ Make a reasonable attempt to obtain the following:
 - Voluntary Medical Background Form for a Surrendered Newborn (DHS Form 4819)
 - Voluntary Release for Adoption of a Surrendered Newborn by Parent (DHS Form 4820)

NOTE: The parent(s) does not have to complete these forms.

- ☐ Physician examines newborn and determines if there is reason to suspect abuse and/or neglect.
- ☐ Refer to Children's Protective Services if there are reasons to suspect abuse and/or neglect and file Report of Actual or Suspected Child Abuse or Neglect (DHS Form 3200).
- ☐ Contact child placing agency if no signs of abuse and/or neglect for placement in an approved adoptive home.

NOTE: A complete listing of private adoption agencies willing to accept a surrendered newborn is found in the *Response and Resource Handbook* and the Safe Delivery Web site at www.michigan.gov/dhs. This is an alphabetical listing by county and agencies that provide statewide coverage.
- ☐ Provide child placing agency with information provided by and to the surrendering parent(s).
- ☐ Complete the birth registration form according to hospital policy.

NOTE: Safe Delivery is not intended to be a substitute for releasing a child for adoption under Michigan's Adoption Code.

NOTE: Sample parent packets are located in the back of the *Response and Resource Handbook*. More information on safe delivery resources can be found in the Public Awareness section of the *Response and Resource Handbook*.



SAFE DELIVERY SURRENDER CHECKLIST

FOR HOSPITAL EMERGENCY SERVICE PROVIDERS (PARENT(S) BRINGS NEWBORN TO HOSPITAL FOR SURRENDER)

- ☐ Assume child is a newborn and accept temporary protective custody.
- ☐ Ask surrendering person(s) if they are the biological parent(s). If they are not the biological parents the newborn cannot be surrendered under the Safe Delivery of Newborns law.
- ☐ Make a reasonable effort to give surrendering parent(s):
 - Surrendering Parent Rights (DHS Pub 866)
 - Safe Delivery Program FACT Sheet (DHS Pub 867)
- ☐ Make a reasonable attempt to obtain the following:
 - Voluntary Medical Background Form for a Surrendered Newborn (DHS Form 4819)
 - Voluntary Release for Adoption of a Surrendered Newborn by Parent (DHS Form 4820)

NOTE: The parent(s) does not have to complete these forms.

- ☐ Physician examines newborn and determines if there is reason to suspect abuse and/or neglect.
- ☐ Refer to Children's Protective Services if there are reasons to suspect abuse and/or neglect or child is determined to be older than 72 hours and file Report of Actual or Suspected Child Abuse or Neglect (DHS Form 3200).
- ☐ Contact child placing agency if no signs of abuse and/or neglect for placement in an approved adoptive home.

NOTE: A complete listing of private adoption agencies willing to accept a surrendered newborn is found in the *Response and Resource Handbook* and the Safe Delivery Web site at www.michigan.gov/dhs. This is an alphabetical listing by county and agencies that provide statewide coverage.
- ☐ Provide child placing agency with information provided by and to the surrendering parent(s).

NOTE: Sample parent packets are located in the back of the *Response and Resource Handbook*. More information on safe delivery resources can be found in the Public Awareness section of the *Response and Resource Handbook*.



SAFE DELIVERY SURRENDER CHECKLIST

FOR HOSPITAL EMERGENCY SERVICE PROVIDERS (FIRE/POLICE TRANSFER NEWBORN TO HOSPITAL)

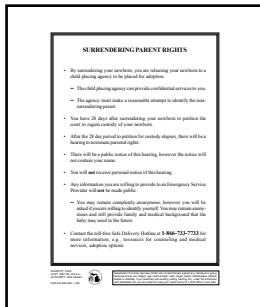
- ☐ Accept temporary protective custody of newborn.
- ☐ Physician examines newborn and determines if there is reason to suspect abuse and/or neglect.
- ☐ Refer to Children's Protective Services if there are reasons to suspect abuse and/or neglect or child is determined to be older than 72 hours and file Report of Actual or Suspected Child Abuse or Neglect (DHS Form 3200).
- ☐ Contact child placing agency if no signs of abuse and/or neglect for placement in an approved adoptive home.
NOTE: A complete listing of private adoption agencies willing to accept a surrendered newborn is found in the *Response and Resource Handbook* and the Safe Delivery Web site at www.michigan.gov/dhs. This is an alphabetical listing by county and agencies that provide statewide coverage.
- ☐ Provide child placing agency with information provided by and to the surrendering parent(s).

NOTE: Sample parent packets are located in the back of the *Response and Resource Handbook*. More information on safe delivery resources can be found in the Public Awareness section of the *Response and Resource Handbook*.

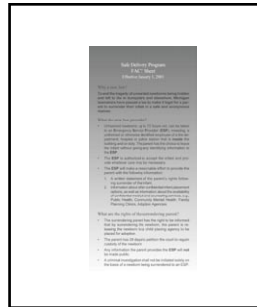


PUBLICATIONS AND FORMS AT-A-GLANCE

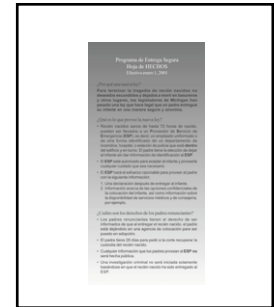
ESP GIVES PUBLICATIONS TO PARENT(S):



Pub 866



Pub 867



Pub 867 SP

ESP MAKES A REASONABLE ATTEMPT TO HAVE FORMS 4819 AND 4820 COMPLETED BY THE PARENT(S). NOTE: PARENT(S) DOES NOT HAVE TO COMPLETE.

Form 4819

Form 4820

PUBLIC AWARENESS



Pub 864



Pub 875

A GUIDE TO DEVELOPING A HOSPITAL POLICY

The law at a glance:

- A newborn can be surrendered to a hospital in one of three ways:
 - The newborn is brought to the hospital by another emergency service provider (fire or police department) or,
 - The newborn is brought to the hospital by the parent(s) wanting to surrender the child or,
 - The newborn is delivered at the hospital and the mother informs staff that she wants to surrender the child.
- Parent(s) may bring an unharmed newborn, up to 72 hours old, to the hospital. The parent(s) may state that he or she wants to leave the newborn at the hospital as allowed by the Safe Delivery of Newborns law.
- Assume the child is a newborn and take into temporary protective custody.
- Ask surrendering person(s) if they are the biological parent(s). If they are not the biological parent(s) the newborn cannot be surrendered under the Safe Delivery of Newborns law.
- Hospital personnel receiving the newborn under the Safe Delivery of Newborns law must be aware that the surrendering parent(s) may choose to remain completely anonymous.
- Hospital staff are required to make a reasonable attempt to provide the surrendering parent(s) with the following:
 - Surrendering Parent Rights (DHS Pub 866)
 - Safe Delivery Program FACT Sheet (DHS Pub 867)
- Hospital staff will make a reasonable attempt to encourage the surrendering parent(s) to provide the following information about the family medical background and to sign a release form:
 - Voluntary Medical Background Form for a Surrendered Newborn (DHS Form 4819)
 - Voluntary Release for Adoption of a Surrendered Newborn by Parent (DHS Form 4820)
- The hospital will have a physician examine the newborn.
- The examining physician will determine if there are signs of abuse and/or neglect and attempt to determine if this is a newborn child.
 - If there are signs of abuse and/or neglect, the physician or hospital staff must immediately contact Children's Protective Services and file Report of Actual or Suspected Child Abuse or Neglect (DHS Form 3200). Safe Delivery law no longer applies.
 - If abuse and/or neglect is not suspected, the hospital will contact a child placing agency (adoption agency) that will assume temporary protective custody and place the infant with a prospective adoptive family.
- Provide the child placing agency with any forms or other information provided to or obtained from the parent(s).

Hospitals may wish to incorporate the Safe Delivery program in two ways:

Administrative: Adjusting applicable hospital policies and procedures, review by legal department and board of directors.

Training: Developing and implementing training for all hospital personnel. ALL STAFF must be informed of the Safe Delivery law and local policies because parent(s) in crisis may leave the newborn with any uniformed personnel on duty or working inside the premises.



SAMPLE HOSPITAL PROTOCOL

POLICY/PROCEDURE MANUAL

PROCEDURE TITLE: Safe Delivery of Newborns Law

CROSS REFERENCE:

APPROVED BY:

EFFECTIVE DATE:

DATE:

REVIEW DATE:

Policy: To provide guidelines for care and safety of surrendered newborns as established per Michigan Public Acts 232, 233, 234 and 235 of 2000. This legislation exempts the parent(s) surrendering a newborn, which is not a victim of child abuse and/or neglect, from the provisions of the Child Protection Law and provides legal protections for a parent(s) to surrender their infant in a safe and anonymous manner.

Definitions:

- A. Newborn:** A child who a physician reasonably believes to be not more than 72 hours old.
- B. Emergency Service Provider:** A uniformed or otherwise identified employee or contractor of a fire department, hospital, or police station when such an individual is inside the premises and on duty.
- C. Surrender:** To leave a newborn with an emergency service provider without expressing an intent to return for the newborn.

Purpose: To provide medical care and a safe place for a newborn delivered or brought to the hospital by a parent(s) or another emergency service provider for the purpose of surrender.

Responsible Person(s): Hospital Staff

Procedure:

- I. Child is brought to hospital by another emergency service provider (i.e., fire department or police).
 - A. Get copies of any documents parent(s) signed.
 - B. Proceed to step V below.**
- II. Child is brought to hospital by a parent(s) wanting to surrender the child.
 - A. Hospital staff:
 - a. Assume that the child is a newborn and take the newborn into temporary protective custody.
 - b. Ask surrendering person(s) if they are the biological parent(s). If they are not the biological parent(s) the newborn cannot be surrendered under the Safe Delivery of Newborns law.
 - B. Hospital staff takes action to protect the newborn's physical health and safety. Assessment of newborn will be made; decision of the acuity and necessary treatment will be given.
 - C. Hospital staff offer medical assistance to parent(s) and inform the parent(s) that:
 - a. By surrendering the newborn, the parent(s) is releasing the newborn to a child placing agency to be placed for adoption.
 - b. He or she has 28 days to petition the Circuit Court, Family Division to regain custody of the newborn.
 - c. There will be a public notice of this hearing and the notice will not contain the parent(s) name.
 - d. The parent(s) will not receive personal notice of the hearing.
 - e. Information the parent(s) provides to the medical staff will not be made public.
 - f. A parent(s) may contact the Safe Delivery of Newborns hotline for information. The toll free number is: **1-866-733-7733**.



HOSPITAL PROTOCOL

- D. Hospital staff provides written material from Department of Human Services that includes:
 - a. Surrendering Parent Rights (DHS Pub 866)
 - b. Safe Delivery Program FACT Sheet (DHS Pub 867)

III. Hospital staff will make a reasonable attempt to:

- A. Reassure parent(s) that shared information will be kept confidential.
- B. Encourage parent(s) to identify him/herself.
- C. Encourage the parent(s) to share any relevant family/medical history, Voluntary Medical Background Form for a Surrendered Newborn (DHS Form 4819).
- D. Inform the parent(s) of the child he or she can receive counseling or medical attention. Indicate where these are available.
- E. Inform parent(s) that in order to place the child for adoption the state is required to make a reasonable attempt to identify both parents. Ask for the non-surrendering parent's name. Do not press if the name is refused.
- F. Inform parent of the name and telephone number of the agency taking temporary protective custody of the child and indicate that the agency can provide confidential services to the parent(s).
- G. Inform the parent(s) that he or she can sign a release for the child that could be used at the parental rights termination hearing, Voluntary Release for Adoption of a Surrendered Newborn (DHS Form 4820).

H. Proceed to step V below

IV. Child is surrendered by the parent(s), after delivery of the newborn at the hospital. Hospital staff informs the parent that:

- A. By surrendering the newborn, the parent(s) is releasing the newborn to a child placing agency to be placed for adoption.
- B. The parent(s) has 28 days after surrendering the newborn to petition the court to regain custody.
- C. After the 28-day period elapses, there will be a hearing to terminate parental rights.
- D. There will be public notice of the hearing, and the notice will not contain the parent's name.
- E. The parent(s) will not receive personal notice of this hearing.
- F. Information the parent(s) provides to the medical staff will not be made public.
- G. A parent(s) may contact the Safe Delivery of Newborns hotline for information. The toll free number is:
1-866-733-7733.

H. Hospital staff provides written material from Department of Human Services that includes:

- a. Surrendering Parent Rights (DHS Pub 866)
- b. Safe Delivery Program FACT Sheet (DHS Pub 867)

I. Hospital staff will make a reasonable attempt to:

- a. Reassure parent(s) that shared information will be kept confidential.
- b. Encourage parent(s) to identify him/herself.
- c. Encourage the parent(s) to share any relevant family/medical background, Voluntary Medical Background Form for a Surrendered Newborn (DHS Form 4819).
- d. Inform the parent(s) of the child he or she can receive counseling or medical attention. Indicate where these are available.
- e. Inform parent that in order to place the child for adoption the state is required to make a reasonable attempt to identify the non-surrendering parent. Ask for the non-surrendering parent's name. Do not press if the name is refused.
- f. Inform parent(s) of the name and telephone number of the agency taking temporary protective custody of the child and indicate that the agency can provide confidential services to the parent(s).
- g. Inform the parent(s) that he or she can sign a release for the child that could be used at the parental rights termination hearing, Voluntary Release for Adoption of a Surrendered Newborn by parent (DHS Form 4820).



HOSPITAL PROTOCOL

- J. Doctor performs a clinical assessment to determine if there are signs of abuse and/or neglect.
- K. If there are signs of abuse and/or neglect, the physician or hospital staff must immediately contact Children's Protective Services and file Report of Actual or Suspected Child Abuse or Neglect (DHS Form 3200).
- L. The hospital's social services department will be consulted upon admission and that department will notify a child placing agency (private adoption agency) of a safe delivery.

M. Proceed to VI below if there are no signs of abuse and/or neglect.

V. Caring for the child:

- A. Child is admitted to hospital and registered per hospital policy and clearly identified as a safe delivery newborn. The date and time of arrival must be documented. (This information is how the baby will be identified and will also be considered the birth date of the baby if the parent(s) has not provided the actual date.)
- B. A physician conducts a clinical examination, including a determination of the child's age.
 - a. Results of examination are documented.
 - b. If there are signs of abuse and/or neglect, the physician or hospital staff must immediately contact Children's Protective Services and file Report of Actual or Suspected Child Abuse or Neglect (DHS Form 3200). Safe Delivery no longer applies.
 - c. Hospital staff should provide appropriate care for this child.
 - d. Hospital social services department will be consulted on admission. That department will then notify a child placing agency (private adoption agency) of a safe delivery. The adoption agency will assume temporary protective custody of the child and arrange for an adoptive placement for the child when medically cleared.
- C. Documentation should also include:
 - a. How child was surrendered.
 - b. Where the child was surrendered.
 - c. Time child was surrendered.
 - d. Hospital personnel involved.
 - e. Information provided by parent(s).

VI. Application for Medicaid

- A. An application for Medicaid coverage for the newborn can be filed by any one of the following:
 - a. Provider hospital.
 - b. Child placing agency (adoption agency).
 - c. Lawyer Guardian ad litem.
 - d. Prospective adoptive parent(s).

VII. Birth Registration

- A. If the newborn is brought to the hospital by the parent(s) or emergency service provider, the adoption agency that assumes temporary protective custody of the newborn will be responsible for making an application for the birth registration. Reporting of the birth will be handled as a "foundling" registration.
- B. If the newborn is delivered and surrendered at the hospital, hospital staff will follow hospital procedures for the birth registration.



ADOPTION AGENCY DIRECTORY

MICHIGAN PRIVATE ADOPTION AGENCIES THAT WILL PROVIDE PLACEMENT FOR A SURRENDERED NEWBORN IN AN APPROVED ADOPTIVE HOME.

This list was compiled from a survey conducted in 2005 requesting information on agencies willing to place a newborn surrendered under Public Act 232 of 2000, Safe Delivery of Newborns, and effective January 1, 2001.

This list is organized alphabetically by Michigan counties where the private, nonprofit licensed adoption agencies are located and also lists the name and phone number of agencies that serve multiple counties. Several agencies serve the entire state and are alphabetically listed under "Serves Statewide" in addition to their main office locations.

UPDATED 1/2006

Serve Statewide

Adoption Associates (Four Sites):

26105 Orchard Lake Road, Ste. 301
Farmington Hills 48334
(248) 474-0990
(877) 257-3591

West Michigan

1338 Baldwin
Jenison 49428
(616) 667-0677
(800) 677-2367

Central Michigan

800 Thomas L. Parkway, Ste. 1
Lansing 48917
(517) 327-1388
(877) 869-4196

Saginaw Office

4901 Towne Center
Saginaw 48604
(989) 497-5437

Adoptaid of Greater Hope, Inc.

4350 Plainfield, Ste. H
Grand Rapids, 49525
(616) 365-3166

Family Adoption Consultants (Lower Peninsula only)

421 W. Crosstown Parkway
Kalamazoo 49005
(269) 343-3316

Hands Across the Water

2890 Carpenter Road, Ste. 600
Ann Arbor 48108
(734) 477-0135

Keane Center for Adoption

930 Mason
Dearborn 48124
(313) 277-4664

LDS Family Services

37634 Enterprise Court
Farmington Hills 48331
(248) 553-0902

Morning Star Adoption Center

15635 W. 12 Mile
Southfield 48706
(248) 483-5484



ADOPTION AGENCY DIRECTORY

Serve Counties

ALCONA

Bethany Christian Services
3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110
(800) 779-0396

Child and Family Services of Northeastern Michigan

1044 US 23 North
Alpena 49707
(989) 356-4567

ALGER

Bethany Christian Services
3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.

347 Rock St.
Marquette 49855
(906) 227-9119

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

ALLEGAN

Bethany Christian Services
6687 Seeco Drive
Kalamazoo 49009
(269) 372-8800

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Family Services-Caring Network

1441 S. Westnedge Ave.
Kalamazoo 49008
(269) 381-1234

ALPEN A

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services

154 S. Ripley
Alpena 49707
(989) 356-6385

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northeastern Michigan

1044 US 23 North
Alpena 49707
(989) 356-4567
(800) 779-0396

ANTRIM

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northwestern Michigan

3785 Veterans Drive
Traverse City 49684
(231) 946-8975
(800) 538-9984

ARENAC

Catholic Family Services

915 Columbus Ave.
Bay City 48708
(989) 892-2504

BARAGA

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.

347 Rock St.
Marquette 49855
(906) 227-9119

BARRY

Bethany Christian Services

6687 Seeco Drive
Kalamazoo 49009
(269) 372-8800

Catholic Family Services-Caring Network

1441 S. Westnedge Ave.
Kalamazoo 49008
(269) 381-1234

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

Family and Children's Services

1608 Lake St.
Kalamazoo 49001
(269) 344-0202

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920



ADOPTION AGENCY DIRECTORY

BAY

Catholic Family Services

915 Columbus Ave.
Bay City 48708
(989) 892-2504

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

BENZIE

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northwestern Michigan

3785 Veterans Drive
Traverse City 49684
(231) 946-8975
(800) 538-9984

BERRIEN

Bethany Christian Services

6687 Seeco Drive
Kalamazoo 49009
(269) 372-8800

Catholic Family Services-Caring Network

1441 S. Westnedge Ave.
Kalamazoo 49008
(269) 381-1234

BRANCH

Bethany Christian Services

6687 Seeco Drive
Kalamazoo 49009
(269) 372-8800

Catholic Family Services-Caring Network

1441 S. Westnedge Ave.
Kalamazoo 49008
(269) 381-1234

CALHOUN

Bethany Christian Services

6687 Seeco Drive
Kalamazoo 49009
(269) 372-8800

Catholic Family Services-Caring Network

1441 S. Westnedge Ave.
Kalamazoo 49008
(269) 381-1234

Family and Children's Services

1608 Lake St.
Kalamazoo 49001
(269) 344-0202

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

CASS

Bethany Christian Services

6687 Seeco Drive
Kalamazoo 49009
(269) 372-8800

Catholic Family Services-Caring Network

1441 S. Westnedge Ave.
Kalamazoo 49008
(269) 381-1234

CHARLEVOIX

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northwestern Michigan

3785 Veterans Drive
Traverse City 49684
(231) 946-8975
(800) 538-9984

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

CHEBOYGAN

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Child and Family Services of Northeastern Michigan

1044 US 23 North
Alpena 49707
(989) 356-4567
(800) 779-0396

Child and Family Services of Northwestern Michigan

3785 Veterans Drive
Traverse City 49684
(231) 946-8975
(800) 538-9984

CHIPPEWA

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.

347 Rock St.
Marquette 49855
(906) 227-9119



ADOPTION AGENCY DIRECTORY

CLARE

Catholic Family Services

915 Columbus Ave.
Bay City 48708
(989) 892-2504

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

CLINTON

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

St. Vincent Catholic Charities

2800 W. Willow
Lansing 48917
(517) 323-4734

CRAWFORD

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northeastern Michigan

1044 US 23 North
Alpena 49707
(989) 356-4567
(800) 779-0396

Child and Family Services of Northwestern Michigan

3785 Veterans Drive
Traverse City 49684
(231) 946-8975
(800) 538-9984

DELTA

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.

623 Ludington, Ste 200
Escanaba 49829
(906) 786-7212

Catholic Charities of the U.P.

347 Rock St.
Marquette 49855
(906) 227-9119

DICKINSON

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.

623 Ludington, Ste. 200
Escanaba 49829
(906) 786-7212

Catholic Charities of the U.P.

347 Rock St.
Marquette 49855
(906) 227-9119

EATON

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

St. Vincent Catholic Charities

2800 W. Willow
Lansing 48917
(517) 323-4734

EMMET

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northwestern Michigan

3785 Veterans Drive
Traverse City 49684
(231) 946-8975
(800) 538-9984

GENESEE

Catholic Charities of Shiawassee and Genesee

901 Chippewa St.
Flint 48503
(810) 232-9950

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

St. Vincent Catholic Charities

2800 W. Willow
Lansing 48917
(517) 323-4734



ADOPTION AGENCY DIRECTORY

GLADWIN

Catholic Family Services

915 Columbus Ave.
Bay City 48708
(989) 892-2504

GOGEBIC

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.

623 Ludington, Ste. 200
Escanaba 49829
(906) 786-7212

Catholic Charities of the U.P.

347 Rock St.
Marquette 49855
(906) 227-9119

GRAND TRAVERSE

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northwestern Michigan

3785 Veterans Drive
Traverse City 49684
(231) 946-8975

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

GRATIOT

Catholic Family Services

915 Columbus Ave.
Bay City 48708
(989) 892-2504

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

HILLSDALE

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

HOUGHTON

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.

623 Ludington, Ste. 200
Escanaba 49829
(906) 786-7212

Catholic Charities of the U.P.

347 Rock St.
Marquette 49855
(906) 227-9119

HURON

Catholic Family Services

915 Columbus Ave.
Bay City 48708
(989) 892-2504

INGHAM

Adoption Associates- Central Michigan

800 Thomas L. Parkway, Ste. 1
Lansing 48917
(517) 327-1388
(877) 869-4196

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

St. Vincent Catholic Charities

2800 W. Willow
Lansing 48917
(517) 323-4734

IONIA

Catholic Social Services

40 Jefferson SE
Grand Rapids 49503
(616) 356-6227

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

St. Vincent Catholic Charities

2800 W. Willow
Lansing 48917
(517) 323-4734

IOSCO

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110



ADOPTION AGENCY DIRECTORY

Child and Family Services of Northeastern Michigan

1044 US 23 North
Alpena 49707
(989) 356-4567
(800) 779-0396

IRON

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.

623 Ludington, Ste. 200
Escanaba 49829
(906) 786-7212

Catholic Charities of the U.P.

347 Rock St.
Marquette 49855
(906) 227-9119

ISABELLA

Catholic Family Services

915 Columbus Ave.
Bay City 48708
(989) 892-2504

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

JACKSON

Catholic Social Services of Washtenaw (Serves Counties within 60 miles of Washtenaw)

4925 Packard Road
Ann Arbor 48108
(734) 971-9781

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

St. Vincent Catholic Charities

2800 W. Willow
Lansing 48917
(517) 323-4734

KALAMAZOO

Bethany Christian Services

6687 Seeco Drive
Kalamazoo 49009
(269) 372-8800

Catholic Family Services-Caring Network

1441 S. Westnedge Ave.
Kalamazoo 49008
(269) 381-1234

Catholic Social Services

1441 S. Westnedge Ave.
Kalamazoo 49008
(269) 381-1234

Family Adoption Consultants

421 W. Crosstown Parkway
Kalamazoo 49005
(269) 343-3316

Family and Children's Services

1608 Lake St.
Kalamazoo 49001
(269) 344-0202

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

KALKASKA

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northwestern Michigan

3785 Veterans Drive
Traverse City 49684
(231) 946-8975
(800) 538-9984

KENT

Adoptaid of Greater Hope, Inc.

4350 Plainfield, Ste. H
Grand Rapids, 49525
(616) 365-3166

Bethany Christian Services

901 Eastern Ave. NE
Grand Rapids 49501
(616) 224-7479

Catholic Social Services

40 Jefferson SE
Grand Rapids 49503
(616) 356-6227

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920



ADOPTION AGENCY DIRECTORY

KEWEENAW

Bethany Christian Services
3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.
347 Rock St.
Marquette 49855
(906) 227-9119

LAPEER

Catholic Charities of Shiawassee and Genesee
901 Chippewa St.
Flint 48503
(810) 232-9950

Child and Parent Services, Inc.
30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

LEELANAU

Catholic Human Services
1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northwestern Michigan
3785 Veterans Drive
Traverse City 49684
(231) 946-8975
(800) 538-9984

LENAWEE

Catholic Social Services of Washtenaw (*Serves Counties within 60 miles of Washtenaw)
4925 Packard Road
Ann Arbor 48108
(734) 971-9781

Family Service and Children's Aid
330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

LIVINGSTON

Catholic Social Services of Washtenaw (*Serves Counties within 60 miles of Washtenaw)
4925 Packard Road
Ann Arbor 48108
(734) 971-9781

Child and Parent Services, Inc.
30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

St. Vincent Catholic Charities
2800 W. Willow
Lansing 48917
(517) 323-4734

Spectrum Human Services Inc. and Affiliated Companies
23077 Greenfield, Ste. 500
Southfield 48075
(248) 552-8020

LUCE

Bethany Christian Services
3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.
347 Rock St.
Marquette 49855
(906) 227-9119

MACKINAC

Bethany Christian Services
3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.
623 Ludington, Ste. 200
Escanaba 49829
(906) 786-7212

Catholic Charities of the U.P.
347 Rock St.
Marquette 49855
(906) 227-9119

MACOMB

Catholic Charities of Shiawassee and Genesee
901 Chippewa St.
Flint 48503
(810) 232-9950

Catholic Charities of Macomb
15945 Canal Road
Clinton Township 48038
(586) 416-2300

Child and Parent Services, Inc.
30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

Homes for Black Children
511 E. Larned St.
Detroit 48226
(313) 961-2994

Methodist Children's Home Society
26645 W. Six Mile Rd.
Detroit 48240
(313) 531-9973

Spectrum Human Services Inc. and Affiliated Companies
23077 Greenfield, Ste. 500
Southfield 48075
(248) 552-8020

MANISTEE

Bethany Christian Services
3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services
1000 Hastings
Traverse City 49686
(231) 947-8110



ADOPTION AGENCY DIRECTORY

Child and Family Services of Northwestern Michigan

3785 Veterans Drive
Traverse City 49684
(231) 946-8975
(800) 538-9984

MARQUETTE

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.

347 Rock St.
Marquette 49855
(906) 227-9119

MASON

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

MECOSTA

Catholic Social Services

40 Jefferson SE
Grand Rapids 49503
(616) 356-6227

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

MENOMINEE

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.

623 Ludington, Ste. 200
Escanaba 49829
(906) 786-7212

Catholic Charities of the U.P.

347 Rock St.
Marquette 49855
(906) 227-9119

MIDLAND

Catholic Family Services

915 Columbus Ave.
Bay City 48708
(989) 892-2504

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

MISSAUKEE

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Child and Family Services of Northwestern Michigan

3785 Veterans Drive
Traverse City 49684
(231) 946-8975
(800) 538-9984

MONROE

Catholic Social Services of Washtenaw (*Serves Counties within 60 miles of Washtenaw)

4925 Packard Road
Ann Arbor 48108
(734) 971-9781

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

MONTCALM

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

MONTMORENCY

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Catholic Social Services

40 Jefferson SE
Grand Rapids 49503
(616) 356-6227

Child and Family Services of Northeastern Michigan

1044 US 23 North
Alpena 49707
(989) 356-4567
(800) 779-0396

MUSKEGON

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Social Services

1095 Third St., Ste. 125
Muskegon 49441
(231) 726-4735

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615



ADOPTION AGENCY DIRECTORY

NEWAYGO

Bethany Christian Services

6995 W. 48th St.
Fremont 49412
(231) 924-3390

D. A. Blodgett Services for Children and Families

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

OAKLAND

Adoption Associates

26105 Orchard Lake Road, Ste. 301
Farmington Hills 48334
(248) 474-0990
(877) 257-3591

Bethany Christian Services

1435 E. 12 Mile Road
Madison Heights 48071
(248) 414-4080

Catholic Charities of Shiawassee and Genesee

901 Chippewa St.
Flint 48503
(810) 232-9950

Catholic Social Services of Washtenaw (*Serves Counties within 60 miles of Washtenaw)

4925 Packard Road
Ann Arbor 48108
(734) 971-9781

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

LDS Family Services

37634 Enterprise Court
Farmington Hills 48331
(248) 553-0902

Methodist Children's Home Society

26645 W. Six Mile Road
Detroit 48240
(313) 531-9973

Morning Star Adoption Center

15635 W. 12 Mile Road
Southfield 48076
(248) 483-5484

Spectrum Human Services Inc. and Affiliated Companies

23077 Greenfield, Ste. 500
Southfield 48075
(248) 552-8020

OCEANA

(See Statewide List)

OGEMAW

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northeastern Michigan

1044 US 23 North
Alpena 49707
(989) 356-4567
(800) 779-0396

ONTONAGON

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.

623 Ludington, Ste. 200
Escanaba 49829
(906) 786-7212

Catholic Charities of the U.P.

347 Rock St.
Marquette 49855
(906) 227-9119

OSCEOLA

Catholic Social Services

40 Jefferson SE
Grand Rapids 49503
(616) 356-6227

Eagle Village

4507 170th Ave.
Hersey 49639
(231) 838-7310

OSCODA

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northeastern Michigan

1044 US 23 North
Alpena 49707
(989) 356-4567
(800) 779-0396

OTSEGO

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110



ADOPTION AGENCY DIRECTORY

Child and Family Services of Northeastern Michigan

1044 US 23 North
Alpena 49707
(989) 356-4567
(800) 779-0396

Child and Family Services of Northwestern Michigan

3785 Veterans Drive
Traverse City 49684
(231) 946-8975
(800) 538-9984

OTTAWA

Adoption Associates-West Michigan

1338 Baldwin
Jenison 49428
(616) 667-0677
(800) 677-2367

Bethany Christian Services

12048 James St.
Holland 49424
(616) 396-0623

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

PRESQUE ISLE

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northeastern Michigan

1044 US 23 North
Alpena 49707
(989) 356-4567
(800) 779-0396

ROSCOMMON

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

SAGINAW

Adoption Associates-Saginaw Office

4901 Towne Center
Saginaw 48604
(989) 497-5437

Catholic Charities of Shiawassee and Genesee

901 Chippewa St.
Flint 48503
(810) 232-9950

Catholic Family Services

915 Columbus Ave.
Bay City 48708
(989) 892-2504

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

ST. CLAIR

(See Statewide List)

ST. JOSEPH

Bethany Christian Services

6687 Seeco Drive
Kalamazoo 49009
(269) 372-8800

Catholic Family Services- Caring Network

1441 S. Westnedge Ave.
Kalamazoo 49008
(269) 381-1234

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

Family and Children's Services

1608 Lake St.
Kalamazoo 49001
(269) 344-0202

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

SANILAC

Catholic Family Services

915 Columbus Ave.
Bay City 48708
(989) 892-2504

SCHOOLCRAFT

Bethany Christian Services

3886 Cass Road
Traverse City 49684
(231) 995-0870

Catholic Charities of the U.P.

623 Ludington, Ste. 200
Escanaba 49829
(906) 786-7212

Catholic Charities of the U.P.

347 Rock St.
Marquette 49855
(906) 227-9119

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790



ADOPTION AGENCY DIRECTORY

SHIAWASSEE

Catholic Charities of Shiawassee and Genesee

901 Chippewa St.
Flint 48503
(810) 232-9950

St. Vincent Catholic Charities

2800 W. Willow
Lansing 48917
(517) 323-4734

TUSCOLA

Catholic Family Services

915 Columbus Ave.
(989) 892-2504

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

VAN BUREN

Bethany Christian Services

6687 Seeco Drive
Kalamazoo 49009
(269) 372-8800

Catholic Family Services- Caring Network

1441 S. Westnedge Ave.
Kalamazoo 49008
(269) 381-1234

WASHTENAW

Catholic Social Services of Washtenaw (*Serves Counties within 60 miles of Washtenaw)

4925 Packard Road
Ann Arbor 48108
(734) 971-9781

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

Hands Across the Water

2890 Carpenter Road, Ste. 600
Ann Arbor 48108
(734) 477-0135

Methodist Children's Home Society

26645 W. Six Mile Road
Detroit 48240
(313) 531-9973

St. Vincent Catholic Charities

2800 W. Willow
Lansing 48917
(517) 323-4734

Spectrum Human Services Inc. and Affiliated Companies

23077 Greenfield, Ste. 500
Southfield 48075
(248) 552-8020

WAYNE

Catholic Charities of Shiawassee and Genesee

901 Chippewa St.
Flint 48503
(810) 232-9950

Child and Parent Services, Inc.

30600 Telegraph, Ste. 2215
Bingham Farms 48025
(248) 646-7790

Family Service and Children's Aid

330 W. Michigan Ave.
Jackson 49201
(517) 787-7920

Homes for Black Children

511 E. Larned St.
Detroit 48226
(313) 961-2994

Keane Center for Adoption

930 Mason
Dearborn 48124
(313) 277-4664

Spectrum Human Services Inc. and Affiliated Companies

23077 Greenfield, Ste. 500
Southfield 48075
(248) 552-8020

Methodist Children's Home Society

26645 W. Six Mile Road
Detroit 48240
(313) 531-9973

WEXFORD

Catholic Human Services

1000 Hastings
Traverse City 49686
(231) 947-8110

Child and Family Services of Northwestern Michigan

3785 Veterans Drive
Traverse City 49684
(231) 946-8975
(800) 538-9984

D. A. Blodgett for Children

805 Leonard St. NE
Grand Rapids 49503
(616) 774-4615

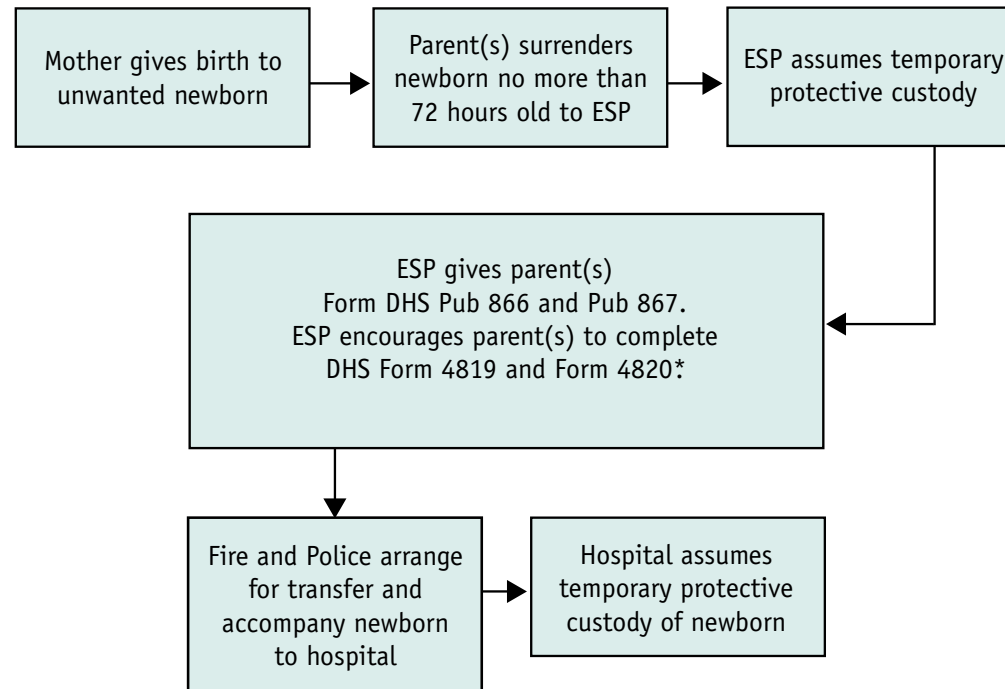


FIRE DEPARTMENT AND POLICE STATION RESPONSE



Safe Delivery Fire and Police Flowchart

(Emergency Service Provider (ESP) Responsibilities)



***Parent may leave at any time without sharing information**

Key

DHS Pub 866—Surrendering Parent Rights
DHS Pub 867—Safe Delivery Program FACT Sheet
DHS Form 4819—Voluntary Medical Background Form
DHS Form 4820—Voluntary Release for Adoption

All documents are available in the handbook and are on the Web site www.michigan.gov/dhs.



SAFE DELIVERY SURRENDER CHECKLIST

FOR FIRE DEPARTMENT AND POLICE STATION (EMERGENCY SERVICE PROVIDERS)

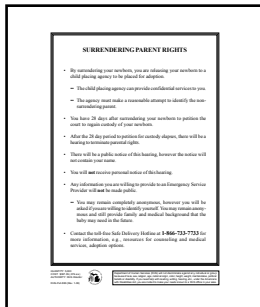
- ☐ Assume child is a newborn and accept temporary protective custody.
 - ☐ Ask surrendering person(s) if they are the biological parent(s). If they are not the biological parent(s) the newborn cannot be surrendered under the Safe Delivery of Newborns law.
 - ☐ Make a reasonable effort to give the surrendering parent(s):
 - Surrendering Parent Rights (DHS Pub 866)
 - Safe Delivery Program FACT Sheet (DHS Pub 867)
 - ☐ Make a reasonable attempt to obtain the following:
 - Voluntary Medical Background Form for a Surrendered Newborn (DHS Form 4819)
 - Voluntary Release for Adoption of a Surrendered Newborn by Parent (DHS Form 4820)
- NOTE:** The parent(s) does not have to complete these forms. Sample Parent Packets are in the back of the *Response and Resource Handbook*.
- ☐ Contact Emergency Medical Services (EMS) to transport newborn to a hospital.
 - ☐ Accompany or follow the infant to the hospital and provide hospital with any forms completed by the parent(s).

NOTE: Sample parent packets are located in the back of the *Response and Resource Handbook*. More information on safe delivery resources can be found in the Public Awareness section of the *Response and Resource Handbook*.



PUBLICATIONS AND FORMS AT-A-GLANCE

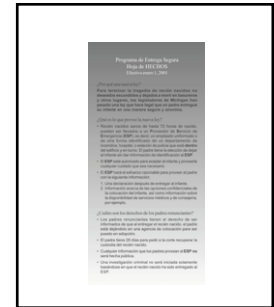
ESP GIVES PUBLICATIONS TO PARENT(S):



Pub 866



Pub 867



Pub 867 SP

ESP MAKES A REASONABLE ATTEMPT TO HAVE FORMS 4819 AND 4820 COMPLETED BY THE PARENT(S). NOTE: PARENT(S) DOES NOT HAVE TO COMPLETE.

Form 4819

Form 4820

PUBLIC AWARENESS



Pub 864



Pub 875

A GUIDE TO DEVELOPING A FIRE OR POLICE POLICY

The law at a glance:

- Parent(s) may bring an unharmed newborn, up to 72 hours old, to a fire department or police station. The parent(s) may state that he or she wants to leave the newborn with a uniformed or otherwise identified employee or contractor inside the premises as allowed by the Safe Delivery of Newborns law.
- Assume that the child is a newborn and take into temporary protective custody.
- Ask surrendering person(s) if they are the biological parent(s). If they are not the biological parent(s) the newborn cannot be surrendered under the Safe Delivery of Newborns law.
- An employee receiving the newborn under the Safe Delivery of Newborns law must be aware that the surrendering parent(s) may chose to remain completely anonymous.
- Employees are required to make a reasonable attempt to provide the surrendering parent(s) with the following:
 - Surrendering Parent Rights (DHS Pub 866)
 - Safe Delivery Program FACT Sheet (DHS Pub 867)
- Employees will make a reasonable attempt to encourage the surrendering parent(s) to provide the following information about the family medical background and to sign a release form:
 - Voluntary Medical Background Form for a Surrendered Newborn (DHS Form 4819)
 - Voluntary Release for Adoption of a Surrendered Newborn by Parent (DHS Form 4820)
- Arrange for transport and accompany the newborn to a hospital.
- Transfer temporary protective custody of the newborn to hospital personnel.
- Provide the hospital personnel with any forms or other information provided to or obtained from the parent(s).

Fire departments and law enforcement agencies may wish to incorporate the Safe Delivery program in two ways:

Administrative: Adjusting applicable departmental policies and procedures and review by legal department.

Training: Developing and implementing training for all personnel. ALL STAFF must be informed of the Safe Delivery law and local policies because parent(s) in crisis may leave the newborn with any uniformed personnel on duty or working inside the premises.



SAMPLE STANDARD OPERATING GUIDELINE

STANDARD OPERATING GUIDELINE FOR SAFE DELIVERY OF NEWBORNS

PURPOSE

To implement the provisions Public Acts 232, 233, 234, and 235 of 2000.

BACKGROUND

In response to the significant number of newborn infants being abandoned by their parents, the Michigan Legislature passed Acts 232, 233, 234, and 235 in June of 2000, with an effective date of January 1, 2001. These acts affect **ALL FIRE DEPARTMENTS AND POLICE STATIONS in Michigan**. They provide that a parent(s) may surrender an infant to an emergency service provider. This means that a parent(s) of a newborn can surrender an unwanted newborn at any fire department or police station and remain anonymous.

DEFINITIONS

Newborn: A child who a physician reasonably believes to be not more than 72 hours old.

Emergency Service Provider: A uniformed or otherwise identified employee or contractor of a fire department, hospital, or police station when such an individual is inside the premises and on duty.

Surrender: To leave a newborn with an emergency services provider without expressing an intent to return for the newborn.

PROCEDURES

The surrender of the infant must occur inside the fire department or police station. The firefighter or police officer cannot refuse to accept the infant and must place the infant under temporary protective custody. Fire departments and police stations have statutory obligations under the law, including:

1. Assume that the child is a newborn and take into temporary protective custody.
2. Ask surrendering person(s) if they are the biological parent(s). If they are not the biological parent(s) the newborn cannot be surrendered under the Safe Delivery of Newborns law.
3. Make a reasonable effort to inform the parent(s) that:
 - a. By surrendering the newborn, the parent(s) is releasing the newborn to a child placing agency to be placed for adoption.
 - b. He or she has 28 days to petition the Circuit Court, Family Division to regain custody of the newborn.
 - c. There will be a public notice of this hearing and the notice will not contain the parent(s) name.
 - d. The parent(s) will not receive personal notice of the hearing.
 - e. Information the parent(s) provides will not be made public.
 - f. A parent(s) may contact the Safe Delivery of Newborns hotline for information. The toll free number is: **1-866-733-7733**.



SAMPLE STANDARD OPERATING GUIDELINE

4. Provide the parent(s) with written material from the Department of Human Services that includes:
 - a. Surrendering Parent Rights (DHS Pub 866)
 - b. Safe Delivery Program FACT Sheet (DHS Pub 867)
5. Make a reasonable attempt to:
 - a. Reassure parent(s) that shared information will be kept confidential.
 - b. Encourage parent(s) to identify him/herself.
 - c. Encourage the parent(s) to share any relevant family/medical background, Voluntary Medical Background Form for a Surrendered Newborn (DHS Form 4819).
 - d. Inform the parent(s) of the newborn he or she can receive counseling or medical attention.
 - e. Inform parent that in order to place the child for adoption the state is required to make a reasonable attempt to identify both parents. Ask for the non-surrendering parent's name. Do not press if the name is refused.
 - f. Inform the parent(s) that he or she can sign a release for the child that could be used at the parental rights termination hearing, Voluntary Release for Adoption of a Surrendered Newborn (DHS Form 4820).
6. Arrange to transport and accompany the newborn to the hospital.

NOTE: Temporary protective custody cannot be transferred to EMS if they are not employees or contractors of the fire department or police station receiving the baby from the parent(s). A representative of the fire department or police station must go to the hospital to transfer custody to the hospital.

NOTE: In 2000, a Safe Delivery of Newborns Model SOG was released to all Michigan fire departments. This model was developed by Chief G. K. Martin, Lansing Fire Department, representing the Michigan Association of Fire Chiefs and Charles E. Cribley, Fire Marshall Division, Michigan State Police, in consultation with John Hubinger, EMS Section, Department of Consumer and Industry Services, Brian Lovellette, Executive Director, Michigan Association of Ambulance Services and Dale Berry, President and CEO, Huron Valley Ambulance.



SAMPLE STANDARD OPERATING GUIDELINE

Complete all parts of the checklist below:

CHECKLIST

- ☐ Assume child is a newborn and accept temporary protective custody.
- ☐ Ask the surrendering person(s) if they are the biological parent(s). If they are not the biological parent(s) the newborn cannot be surrendered under the Safe Delivery of Newborns law.
- ☐ Provide Surrendering Parent Rights (DHS Pub 866) and Safe Delivery Program FACT Sheet (DHS Pub 867) to the parent(s) surrendering the newborn.
- ☐ Obtain as much medical background as possible, using the Voluntary Medical Background Form for a Surrendered Newborn (DHS Form 4819). Completion of this form is voluntary on the part of the surrendering parent(s). They are not required to provide any information.
- ☐ Ask the parent(s) surrendering the newborn to complete and sign a Voluntary Release For Adoption of a Surrendered Newborn by Parent (DHS Form 4820). Completion of this form is voluntary on the part of the surrendering parent(s). They are not required to provide any information.
- ☐ Arrange to transport and accompany newborn to a hospital and provide hospital with any forms completed by the parent(s).
- ☐ Transfer temporary protective custody of the newborn to the hospital staff.
- ☐ Provide the hospital with information provided by and to the surrendering parent(s).
- ☐ Complete an incident report as required by agency policy.
- ☐ Attach the following to the incident report:
 - a. The completed checklist.
 - b. The ambulance report.
 - c. If completed, a copy of the Voluntary Medical Background Form for a Surrendered Newborn (DHS Form 4819) and the Voluntary Release For Adoption of a Surrendered Newborn by Parent (DHS Form 4820).

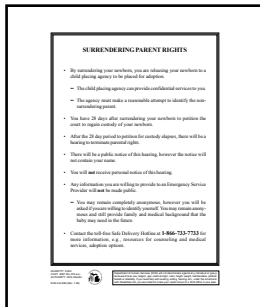


PUBLIC AWARENESS



PUBLICATIONS AND FORMS AT-A-GLANCE

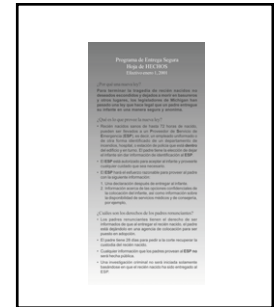
ESP GIVES PUBLICATIONS TO PARENT(S):



Pub 866



Pub 867



Pub 867 SP

ESP MAKES A REASONABLE ATTEMPT TO HAVE FORMS 4819 AND 4820 COMPLETED BY THE PARENT(S). NOTE: PARENT(S) DOES NOT HAVE TO COMPLETE.

Form 4819

Form 4820

PUBLIC AWARENESS



Pub 864



Pub 875

PUBLICATIONS



Publications from the Michigan Department of Human Services On Safe Delivery of Newborns Law

The Michigan Department of Human Services (DHS) has a number of publications and forms on Safe Delivery of Newborns law. Lists of publications and forms that address subsections of the law are included below. For a complete list of resources available from DHS, or to download publications, go to www.michigan.gov/dhs, click on Safe Delivery logo.

Publications and forms can be downloaded and copied from the internet or can be ordered free of charge by calling the Office Services Division at 517-373-7837, or faxing this order form to 517-335-4017.

		Document Name and Description	Quantity
Safe Delivery	Pub 864	<u>What am I going to do?</u> Brochure written for teens and young adults about Safe Delivery.	
	Pub 866	<u>Surrendering Parent Rights</u> Document outlines the rights of parent(s) who have surrendered a newborn.	
	Pub 867	<u>Safe Delivery Program FACT Sheet</u> Fact sheet that describes the intent of the legislation.	
	Pub 867-SP	<u>Programa de Entrega Segura Hoja de Hechos</u> Un Folleto de Programa, describe la intención de la Entrega Segura de la Ley de Recién Nacidos.	
	Pub 875	<u>Safe Delivery Poster</u> Large (18" x 24") poster with toll free number.	
	Form 4819	<u>Voluntary Medical Background Form</u> Form for a surrendered newborn is not mandated, and is a voluntary form completed by the parent(s) or emergency services provider. The provision of this information about the medical background, would assist with the newborn's care.	
	Form 4820	<u>Voluntary Release for Adoption</u> Written affirmation that the surrendering parent(s) voluntarily released their parental rights to their newborn child.	
Adoption	Pub 823	<u>Adopting a Child in Michigan</u> Booklet that provides an overview of Michigan's adoption law, describes the types of adoptions available, the role of the court and other helpful information.	
	Pub 255	<u>Adoption Program Statement</u> Brochure that addresses the concentrated effort of the state agency to find homes for permanent state and court wards.	

Name: _____

Agency: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Email: _____



WHAT AM I GOING TO DO? (DHS PUB 864)

SAFE DELIVERY

Surrendering Parent Rights

By surrendering your newborn, you are releasing your newborn to a child placing agency to be placed for adoption.

You have 28 days after surrendering your newborn to petition the court to regain custody.

After the 28 days end there will be a hearing to terminate your parental rights.

There will be a public notice of this hearing; however, the notice will not contain your name.

You will NOT receive personal notice of the hearing.

Any information you are willing to provide to an Emergency Service Provider will NOT be made public.

Contact the safe delivery
hotline for more information
on safe delivery:

1-866-733-7733
TOLL-FREE

A "Safe Place"

is:

- Fire Station
- Police Station
- Hospital

SAFE DELIVERY

Learn more about your CHOICES

Call: 1-866-733-7733

The Family Independence Agency will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to an FIA office in your county.

Quantity: 200,000 • Cost: \$13,575.00 (0670 ea.) • Authority: FIA Director
State of Michigan • Family Independence Agency
FIA-Pub-864-NET (1-01)

**What
am I
going to
do?**

**SAFE
DELIVERY**

**Please
don't abandon
your baby!**

Young and Scared?

You may be a teen or a young adult who is not ready emotionally or financially to be a parent. Maybe you have been able to keep your pregnancy a secret. But now what? You have a choice to take your newborn to a safe place.

What is a Safe Place?

If your baby is three days old or less, it is not a crime to surrender your newborn to an employee of a hospital, fire department or a police station.

No One Needs to Know

You can leave without giving your name. It would help the baby if you gave some basic health information. However, you do not have to answer any questions.

It is your choice.

What Happens to Your Baby?

If your baby needs medical attention, he or she will receive it. The professional staff person who accepts the baby will contact an adoption agency. Social workers will place the baby with a pre-adoptive family. There are many families who want to adopt. The plan is to make sure your baby has a good home where he or she can grow up healthy and happy.

It's Your Choice

Maybe you made a mistake. But you can make a good choice now. You can choose a safe place for your newborn. It is a decision that will help you and your baby. Your baby can have a family

KEEP THIS CARD OR GIVE IT TO A FRIEND

Learn more
about:

**SAFE
DELIVERY**

Call: 1-866-733-7733
TOLL-FREE



SURRENDERING PARENT RIGHTS

- By surrendering your newborn, you are releasing your newborn to a child placing agency to be placed for adoption.
 - The child placing agency can provide confidential services to you.
 - The agency must make a reasonable attempt to identify the non-surrendering parent.
- You have 28 days after surrendering your newborn to petition the court to regain custody of your newborn.
- After the 28 day period to petition for custody elapses, there will be a hearing to terminate parental rights.
- There will be a public notice of this hearing, however the notice will not contain your name.
- You will **not** receive personal notice of this hearing.
- Any information you are willing to provide to an Emergency Service Provider will **not** be made public.
 - You may remain completely anonymous, however you will be asked if you are willing to identify yourself. You may remain anonymous and still provide family and medical background that the baby may need in the future.
- Contact the toll-free Safe Delivery Hotline at **1-866-733-7733** for more information, e.g., resources for counseling and medical services, adoption options.

QUANTITY: 5,000
COST: \$367.09 (.074 ea.)
AUTHORITY: DHS Director
DHS-Pub 866 (Rev. 1-06)



Department of Human Services (DHS) will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.



PROGRAM FACT SHEET (DHS PUB 867)

FRONT

Safe Delivery Program FACT Sheet Effective January 1, 2001

Why a new law?

To end the tragedy of unwanted newborns being hidden and left to die in dumpsters and elsewhere, Michigan lawmakers have passed a law to make it legal for a parent to surrender their infant in a safe and anonymous manner.

What the new law provides?

- Unharmed newborns, up to 72 hours old, can be taken to an **Emergency Service Provider (ESP)**, meaning, a uniformed or otherwise identified employee of a fire department, hospital or police station that is **inside** the building and on duty. The parent has the choice to leave the infant without giving any identifying information to the **ESP**.
- The **ESP** is authorized to accept the infant and provide whatever care may be necessary.
- The **ESP** will make a reasonable effort to provide the parent with the following information:
 1. A written statement of the parent's rights following surrender of the infant.
 2. Information about other confidential infant placement options, as well as information about the availability of confidential medical and counseling services, e.g., Public Health, Community Mental Health, Family Planning Clinics, Adoption Agencies.

What are the rights of the surrendering parent?

- The surrendering parent has the right to be informed that by surrendering the newborn, the parent is releasing the newborn to a child placing agency to be placed for adoption.
- The parent has 28 days to petition the court to regain custody of the newborn.
- Any information the parent provides the **ESP** will **not** be made public.
- A criminal investigation shall not be initiated solely on the basis of a newborn being surrendered to an **ESP**.

BACK

What happens to the baby?

- After the child's medical status is assessed and any urgent medical needs are met, the newborn is placed under the temporary custody of the court in an approved preadoptive family.
- After the 28-day period for the parent to petition the court for custody elapses, there will be a public hearing to terminate parental rights.
- There will be a public notice of this hearing, and the notice will not contain the parent's name, even if known.
- The parent will not receive personal notice of this hearing, even if the parent has provided a name and address to the **ESP**.
- The infant will be placed for adoption as soon as parental rights have been legally terminated.

Can the parent provide background information?

Yes! Definitely, yes. The **ESP** will make a reasonable attempt to offer the parent the opportunity to:

1. Identify herself/himself and the other parent.
2. Provide information about prenatal care.
3. Provide family medical history and any history of parental substance abuse.
4. To sign a release of parental rights.
5. Receive information about confidential medical care she may be in need of herself.

Does this law encourage parental irresponsibility?

There is no evidence from other states that the presence of such laws encourage abandonment.

The purpose of this law is to reduce the tragic loss of life when parents of newborns react out of fear and panic.

**For more information call:
Toll Free: 1-866-733-7733**

**Quantity: 30,000
Cost: \$558.50 (.018 ea.)
Authorization: FIA Director**

The Family Independence Agency will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to an FIA office in your county.

FIA-Pub 867 (11-00)



PROGRAM FACT SHEET SPANISH (DHS PUB 867 SP)

FRONT

Programa de Entrega Segura Hoja de HECHOS Efectivo enero 1, 2001

¿Por qué una nueva ley?

deseados escondidos y dejados a morir en basureros y otros lugares, los legisladores de Michigan han pasado una ley que hace legal que un padre entregue su infante en una manera segura y anónima.

¿Qué es lo que provee la nueva ley?

- Recién nacidos sanos de hasta 72 horas de nacido, pueden ser llevados a un **Proveedor de Servicio de Emergencia (ESP)**, es decir, un empleado uniformado o de otra forma identificado de un departamento de incendios, hospital, o estación de policía que está dentro del edificio y en turno. El padre tiene la elección de dejar el infante sin dar información de identificación al **ESP**.
- El **ESP** está autorizado para aceptar al infante y proveerle cualquier cuidado que sea necesario.
- El **ESP** hará el esfuerzo razonable para proveer al padre con la siguiente información:
 1. Una declaración después de entregar al infante.
 2. Información acerca de las opciones confidenciales de la colocación del infante, así como información sobre la disponibilidad de servicios médicos y de consejería, por ejemplo,

¿Cuáles son los derechos de los padres renunciantes?

- Los padres renunciantes tienen el derecho de ser informados de que al entregar el recién nacido, el padre está dejándolo en una agencia de colocación para ser puesto en adopción.
- El padre tiene 28 días para pedir a la corte recuperar la custodia del recién nacido.
- Cualquier información que los padres provean al **ESP** no será hecha pública.
- Una investigación criminal no será iniciada solamente basándose en que el recién nacido ha sido entregado al **ESP**.

BACK

¿Qué le sucede al bebé?

- Después que el estado médico del niño es evaluado y cualquier necesidad de urgencia médica sea cumplida, el recién nacido es colocado bajo la custodia temporal de la corte en una familia preadoptiva aprobada.
- Después de transcurra el período de 28 días de la petición del padre a la corte por la custodia, habrá una audiencia pública para terminar los derechos de los padres.
- Habrá un aviso público de la audiencia y el aviso no contendrá el nombre de los padres aún siendo conocidos.
- El padre no recibirá aviso personal de la audiencia, aún si el padre ha provisto el nombre y dirección del **ESP**.
- El infante será colocado en adopción tan pronto como los derechos del padre hayan sido legalmente terminados.

¿Puede el padre proveer información de antecedentes?

¡Sí! Definitivamente sí. El **ESP** hará un intento razonable para ofrecer al padre la oportunidad de:

1. Identificarse a sí mismo(a) y el otro padre.
2. Proveer información sobre cuidado prenatal.
3. Proveer la historia médica familiar y cualquier historia de abuso de sustancias por los padres.
4. Firmar la renuncia de los derechos paternales.
5. Recibir información sobre cuidado médico confidencial que el/ella pueda necesitar.

¿Esta ley contribuye a la irresponsabilidad de los padres?

No hay evidencia de otros estados que la presencia de tales leyes contribuyan al abandono.

El propósito de esta ley es reducir la trágica pérdida de una vida cuándo los padres del recién nacido reaccionan por miedo y pánico.

**Para más información llame:
Teléfono Gratis: 1-866-733-7733**

**Quantity: 30,000
Cost: \$558.50 (.018 ea.)
Authorization: FIA Director**

Family Independence Agency (FIA) no discrimina contra ningún individuo o grupo a causa de su raza, sexo, religión, edad, origen nacional, color de piel, estatura, peso, estado matrimonial, creencias políticas o incapacidad. Si Ud. necesita ayuda para leer, escribir, oír, etc., bajo el Acta de Americanos con Incapacidades, usted está invitado a hacer saber sus necesidades conocidas a una oficina de FIA en su condado.

FIA-Pub 867-SP (11-00)



MEDICAL BACKGROUND (DHS FORM 4819)

CONFIDENTIAL Voluntary Medical Background Form for a Surrendered Newborn Michigan Department of Human Services

Preference for Child's Name	Date of Birth
Where was the child born?	Sex

SURRENDERING PARENT BACKGROUND (Optional)

Name		Marital Status <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> D		Date of Birth	Phone Number
Address					
Race	Affiliated with American Indian Tribe <input type="checkbox"/> YES <input type="checkbox"/> NO		Identify Tribe		
Height	Weight	Hair Color		Eye Color	
Any Family History of:					
Sickle Cell Disease	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
Heart Disease	<input type="checkbox"/>	<input type="checkbox"/>			
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>			
Cancer	<input type="checkbox"/>	<input type="checkbox"/>	If Yes Type		
Genetic Disease	<input type="checkbox"/>	<input type="checkbox"/>	If Yes Type		
HIV	<input type="checkbox"/>	<input type="checkbox"/>			
Hepatitis	<input type="checkbox"/>	<input type="checkbox"/>			
Family History of Mental Illness	<input type="checkbox"/>	<input type="checkbox"/>	If Yes Explain		
Drug or Alcohol Usage	<input type="checkbox"/>	<input type="checkbox"/>	If Yes Explain		
Surgical History					

OTHER PARENT BACKGROUND (Optional)

Name		Marital Status <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> D		Date of Birth	Phone Number
Address					
Race	Affiliated with American Indian Tribe <input type="checkbox"/> YES <input type="checkbox"/> NO		Identify Tribe		
Height	Weight	Hair Color		Eye Color	
Any Family History of:					
Sickle Cell Disease	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
Heart Disease	<input type="checkbox"/>	<input type="checkbox"/>			
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>			
Cancer	<input type="checkbox"/>	<input type="checkbox"/>	If Yes Type		
Genetic Disease	<input type="checkbox"/>	<input type="checkbox"/>	If Yes Type		
HIV	<input type="checkbox"/>	<input type="checkbox"/>			
Hepatitis	<input type="checkbox"/>	<input type="checkbox"/>			
Family History of Mental Illness	<input type="checkbox"/>	<input type="checkbox"/>	If Yes Explain		
Drug or Alcohol Usage	<input type="checkbox"/>	<input type="checkbox"/>	If Yes Explain		
Surgical History					

INFORMATION ABOUT THE PREGNANCY

Length of Pregnancy	Weight Gain Lbs.	Drug or Alcohol Use During Pregnancy <input type="checkbox"/> Yes <input type="checkbox"/> No, If yes, Explain
---------------------	---------------------	---

EMERGENCY SERVICE PROVIDER OBSERVATIONS

Comments			
ESP Signature		Date	Phone Number
Address:		City	State Zip Code



MEDICAL BACKGROUND (DHS FORM 4819)

GENERAL INSTRUCTIONS

PURPOSE OF FORM:

The Emergency Service Provider (ESP) is encouraged to obtain the child's family medical history with the understanding that the surrendering parent may still remain anonymous. Completion of the family medical history is **very important** for the current and future health needs of the child.

The Emergency Service Provider should assist the surrendering parent by reading and recording information provided by the surrendering parent about the maternal and paternal family medical history.

INFORMATION ABOUT THE CHILD:

- Ask the surrendering parent if there is a preferred name for the child. If not, record Baby Boy/Girl Doe.
- Enter the child's date of birth.
- Identify the city and state where the child was born. Describe the place of birth: house, motel, etc.
- Sex of child

PARENT INFORMATION:

- The name, date of birth, phone number and address of the surrendering or non-surrendering parent is **not** required.
- The parent should be encouraged to identify as much medical information as is known and provide details where requested.
- The parent profile information of race, height, weight, hair color and eye color is information that the child may want at a future date and should be obtained if the parent is willing to disclose.

INFORMATION ABOUT THE PREGNANCY:

- Encourage the surrendering parent to provide this minimal information about the pregnancy.

EMERGENCY SERVICE PROVIDER OBSERVATIONS:

- Record information observed or discussed with the surrendering parent.
- Sign and date.
- Provide address and phone number.

FORM DISTRIBUTION:

- Original is given to the child-placing agency for adoption planning.
- The ESP should copy and retain per agency protocols.

AUTHORITY: State P.A. 232 of 2000
RESPONSE: Voluntary
PENALTY: None

Department of Human Services (DHS) will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.



VOLUNTARY RELEASE (DHS FORM 4820)

VOLUNTARY RELEASE FOR ADOPTION OF A SURRENDERED NEWBORN BY PARENT Michigan Department of Human Services

In the matter of _____, a newborn child.

1. I, _____, DOB ____ / ____ / ____ am the ☐ mother ☐ father
of the above child, who was born on ____ / ____ / ____ at _____
(place)

2. I understand that I have parental rights to this child and that by signing this release, I voluntarily release all of my parental rights to my child. (Subject to number three below.)

3. I understand that I have 28 days after surrendering my newborn child to petition the court to reclaim custody of my child.

4. I understand that I will not receive notice of any hearings.

5. Understanding the above provisions, I release completely and permanently my parental rights to my child, and release my child to a child placing agency for the purpose of adoption.

6. I acknowledge receipt of the following:

_____ Surrendering Parent Rights (Pub 866) _____ Fact Sheet (Pub 867)

Date ____ / ____ / ____ Parent Signature _____

Address _____

City _____ State ____ Zip _____

Witnessed by _____
Name (type or print)

on _____, at _____
Date Agency and Address

Signature

IF A NOTARY IS AVAILABLE: Notary Public

Subscribed and sworn to before me on _____, _____
Date County and State

My commission expires: _____ Signature: _____
Date

Name (type or print)

AUTHORITY: State P.A. 232 of 2000
RESPONSE: Voluntary
PENALTY: None

Department of Human Services (DHS) will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.

DHS-4820 (Rev. 5-06) MS Word



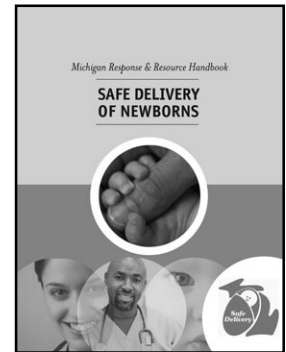
SAFE DELIVERY OF NEWBORNS SITE KIT ORDER FORM

WHY DOES MY AGENCY NEED TO ORDER A SAFE DELIVERY KIT?

Under the Safe Delivery of Newborns legislation passed in 2000, you, as either a fire department, police station, or hospital, are a designated emergency service provider* (ESP). As such, you are mandated to accept any unwanted newborn brought to your facility within 72 hours of birth in a "safe and anonymous manner." To date, there have been approximately 38 surrenders, BUT sadly there have been some potential Safe Delivery deaths as well.



SIGN



HANDBOOK

HOW/WHAT/WHERE?

Please complete and submit this form via fax or mail.
By placing this order, you will receive:

- ✓ Safe Delivery Sign (two styles available)
- ✓ Readiness Checklist
- ✓ The Michigan Safe Delivery Response and Resource Handbook which includes:
 - ✓ Policy development guidelines
 - ✓ Model policies
 - ✓ Surrender flow chart
 - ✓ Frequently Asked Questions
 - ✓ Brochures, materials, etc.

Fax to: 517-324-7365

Mail to: MPHI
2438 Woodlake Circle, Ste. 240
Okemos, MI 48864

SHIPPING INFORMATION

Type of Agency: ☐ Hospital
☐ Fire Department
☐ Police Station

Agency Name: _____

Street Address: _____

City, State, Zip Code: _____

Phone: _____ **Fax:** _____

Email: _____

Agency Contact: _____

Please send: ☐ Handbook
☐ 18" x 18" aluminum sign
☐ 8" x 12" window decal

For more information on Safe Delivery law and procedures, go to the Michigan Department of Human Services Web site at www.michigan.gov/dhs. For more information on obtaining Safe Delivery kits and/or signs, call the **Michigan Public Health Institute at (517) 324-7330**.

*In response to the significant number of newborn infants being abandoned by their parents, the Michigan Legislature passed Acts 232, 233, 234 and 235 in the summer of 2000, with an effective date of January 1, 2001. These acts affect ALL FIRE DEPARTMENTS, POLICE STATIONS, and HOSPITALS in Michigan. They provide that a parent may surrender an infant to an emergency service provider, and go on to define an emergency service provider as "... a uniformed or otherwise identified employee or contractor of a fire department, hospital, or police station when such individual is inside the premises and on duty." This means, quite simply, that a parent (either parent) of a newborn can drop off an unwanted newborn at any hospital, fire department, or police station and remain anonymous.

Special thanks to **Zoot! Advertising Design** for the creation of the new Safe Delivery logo and the Children's Trust Fund for supporting the initial development of the kits.

Office Use Only: Date rec'd _____ Date sent _____ Comments: _____

2/2006



NEWS MEDIA POLICY

RECOMMENDATIONS FOR A SAFE DELIVERY NEWS MEDIA POLICY

It is recommended that all hospitals, fire departments and police stations develop a policy for handling news media inquiries about a surrendered newborn. The Safe Delivery of Newborns law provides the surrendering parent(s) anonymity or assurances of confidentiality should the surrendering parent(s) volunteer to share identifying information.

Suggested guidelines include:

- Identify one representative to handle all safe delivery inquiries.
- The surrender may be confirmed but no additional information should be provided.
- Under no circumstances will the names or identifying information be released to the news media.
- No interviews with the parent(s) should be permitted.
- No photos of the parent(s) or newborn should be permitted.
- Refer the news media to the adoption agency for a positive human-interest story.

Recommendations

The news media can play an important role in educating the public about the Safe Delivery of Newborns law. Stories about infant abandonment can inform readers and viewers about safe choices and safe places for parent(s) who are likely to consider abandonment as the only alternative. News media stories about infant abandonment may be newsworthy and need to be covered, but they provide an excellent opportunity to educate the public about safe alternatives that include adoption and safe delivery.

The recommended angle for the news media is to report on a surrendered newborn at a Safe Delivery site rather than focusing only on infant abandonment. Other topics can include pregnancy counseling, the importance of pre-natal care and adoption alternatives that include knowing and being involved with the adoptive family.

Stories to consider:

- Number of surrenders since January 2001 can be found at www.michigan.gov/dhs.
- Adoption alternatives.
- Signs of a hidden pregnancy.
- Actions that can be taken when you suspect a pregnancy.



MEDIA QUESTIONS & ANSWERS

1. Why was the Safe Delivery legislation necessary?

In 2000, there was an increase in the number of newborns who were abandoned in public places or left to die in unsafe places such as trash receptacles. In response to these tragic events Michigan lawmakers passed the Safe Delivery of Newborns law effective on January 1, 2001 providing legal protections for the parent(s) to surrender their newborn in a safe and anonymous manner. The focus of the law is to first educate the parent(s) that there are safe choices and secondly to protect a newborn from harm and possible death.

2. What does the law provide?

Unharmful newborns up to 72 hours old can be taken to an emergency service provider (ESP), meaning a uniformed or otherwise identified employee or contractor of a fire department, hospital, or police station that is inside the building and on duty. The parent(s) has the choice of leaving the newborn without giving any identifying information although the ESP will encourage the parent(s) to provide minimal family demographics and medical background. Any information provided will not be made public.

Fire and police personnel who assume temporary protective custody of a surrendered newborn will transport the newborn to a hospital for examination by a physician.

If the physician believes that the infant is older than 72 hours or suspects abuse and/or neglect a referral must be made to Children's Protective Services for an investigation.

If the examining physician determines the newborn is no more than 72 hours old and there are no suspicions of abuse and/or neglect, temporary protective custody of the newborn will be transferred to an adoption agency to place the infant with an approved adoptive family.

The biological parent(s) has 28 days to petition Circuit Court, Family Division to regain custody of the newborn.

3. What is the stereotype of a person who abandons their infant?

The generally accepted stereotype is an adolescent or young adult who is frightened and in denial about their pregnancy. What we have learned is that there is not a typical profile of a parent(s) who abandons their infant. Abandonment is a tragedy that crosses all socioeconomic groups, ages, races, ethnicity and educational levels.

4. Why do parents abandon their newborn?

Most of the parents who are likely to abandon their newborn feel there are no alternatives for them. Typically they are isolated and in denial about the pregnancy. Living in this isolation they are left to wrestle with problems that they may not be psychologically or emotionally equipped to handle.

5. Is this the only answer for parents who feel there are no alternatives?

No, the Safe Delivery of Newborns law focuses on educating parents that there are safe choices. A Safe Delivery hotline was established to provide parents with information about counseling services, medical resources, financial resources and adoption. The ESPs are required to make a reasonable effort to provide the parent(s) with information about their options. Communication is the key to saving the life of a newborn. The more people who know about Michigan's Safe Delivery of Newborns law the more likely parents in crisis will know that there are safe alternatives to abandonment.

Media events help to create public awareness of the Safe Delivery of Newborns law and reinforce that there are other safe alternatives to abandonment.

6. How many surrenders have there been since the law went into effect?

Between 2001 and 2005 there were a total of 37 surrendered infants.

7. Is more information available on Safe Delivery?

Information is on the Safe Delivery Web site at www.michigan.gov/dhs and click on the Safe Delivery icon. The 24/7 hotline number in Michigan is **1-866-733-7733**
The national hot line is **1-877-796-HOPE (4673)**



EDUCATION AND TRAINING



FREQUENTLY ASKED QUESTIONS

1. WHEN DID THIS LAW TAKE EFFECT?

January 1, 2001.

2. IN GENERAL, WHAT DOES THE LAW PROVIDE?

This law allows the anonymous surrender of a newborn, from birth to 72 hours of age, to an **emergency service provider**.

3. WHO IS AN EMERGENCY SERVICE PROVIDER (ESP)?

An ESP is defined as a uniformed or otherwise identified employee or contractor of a fire department, hospital or police station when such an individual is inside the premises and on duty.

- ✓ A hospital means a hospital that is licensed under article 17 of the public health code, 1978 PA 368, MCL333.20101 to 333.22260.
- ✓ Fire department means an organized fire department as that term is defined in Section 1 of the fire prevention code 1941 PA 207, MCL29.1.
- ✓ Police station means a police station as that term is defined in section 43 of the Michigan vehicle code, 1949 PA 300 MCL 257.43.

4. EMERGENCY MEDICAL SERVICE (EMS) AGENCIES ARE NOT MENTIONED IN THE LAW, BUT ARE JUST AS LIKELY TO RECEIVE A NEWBORN AS A FIRE DEPARTMENT. WHAT IS THEIR PROCESS?

The law does speak to “uniformed or otherwise identified employee or **contractor** of a fire department, hospital or police station **when such an individual is inside the premises and on duty**”. Given this, contractors are encouraged to talk to their respective hospital, police or fire department to learn of their respective role, if any, relating to the Safe Delivery of Newborns law.

5. WHAT WRITTEN INFORMATION IS THE ESP TO PROVIDE THE SURRENDERING PARENT?

The ESP is required to make a reasonable effort to give the parent(s) the following publications: Surrendering Parent Rights (DHS Pub 866) and Safe Delivery Program FACT Sheet (DHS Pub 867).

6. WHAT OTHER INFORMATION SHOULD THE ESP SHARE?

Reasonable efforts should be made to inform the parent(s) that by surrendering the newborn the newborn will be placed for adoption and that they will have 28 days to petition the court to regain custody of the surrendered child. A reasonable attempt should be made to:

- ✓ Reassure that shared information will be kept confidential.
- ✓ Encourage the parent(s) to identify him/herself.
- ✓ Encourage the parent(s) to share relevant family/medical history (Voluntary Medical Background for a Surrendered Newborn (DHS Form 4819) has been developed to assist with this).
- ✓ Inform the parent(s) that they can receive counseling or medical attention.
- ✓ Inform the parent(s) that a reasonable effort must be made to identify the non-surrendering parent.
- ✓ Inform the parent(s) that the placement agency can provide confidential services.
- ✓ Inform the parent(s) that they may voluntarily sign a release for the newborn to be used in the termination hearing (Voluntary Release For Adoption of a Surrendered Newborn by Parent Form DHS 4820).



FREQUENTLY ASKED QUESTIONS

7. WHERE DOES AN ESP OBTAIN A LISTING OF COUNSELING AND MEDICAL SERVICE PROVIDERS?

This information is available from local offices of Department of Community Health, both mental health and public health departments, pregnancy counseling services, family planning clinics and the Yellow Pages of phone directories.

8. HOW DOES THE ESP KNOW IF THE BABY IS A NEWBORN?

This law defines a newborn as “A child who a physician reasonably believes to be not more than 72 hours old.” Emergency service providers must comply with the requirements of this law under the assumption that the child is a newborn. The hospital must immediately accept the newborn without the necessity of a court order. Later in the process, if a physician determines that the baby is not a newborn, a report must be made to the local office of the Department of Human Services’ (DHS) Children’s Protective Services.

In brief, if the baby appears to be a newborn, follow the procedures outlined in this law.

9. WHAT IF THE PERSON(S) SURRENDERING THE NEWBORN LEAVES WITHOUT PROVIDING ANY ADDITIONAL INFORMATION?

Whether or not the parent(s) provides information has no legal impact on the parent(s). Emergency service providers are obligated to ask, but the parent(s) is not obligated to provide the information.

10. WHAT IF SOMEONE OTHER THAN A PARENT SURRENDERS THE NEWBORN?

The law states the parent(s) must surrender the newborn to a uniformed or otherwise identified employee or contractor of a fire department, hospital or police station who is on duty and inside the premises. If the person surrendering the newborn is not the biological parent(s), the ESP shall retain temporary protective custody of the child and immediately contact law enforcement who will conduct an investigation to determine if the newborn has been abducted, abandoned, or involved in other criminal activities. The local office of DHS’ Children’s Protective Services shall be contacted if the newborn needs to be placed in foster care pending the completion of law enforcement’s investigation.

11. HOW WILL THE NON-SURRENDERING PARENT KNOW ABOUT THE BIRTH AND THE SURRENDER OF THE BABY?

Statute requires that a reasonable attempt to identify the non-surrendering parent must be made, therefore, the emergency service provider will ask for the identity of the non-surrendering parent at the time of the newborn’s surrender. The statute further requires that the child placing agency make a reasonable effort to identify and locate the non-surrendering parent at the time parental rights are terminated. If the name and address of that parent is unknown, the child placing agency shall provide notice by publication in a newspaper of general circulation in the county where the newborn was surrendered.

12. WHAT IF THE NEWBORN IS FOUND ABANDONED ON THE HOSPITAL, FIRE DEPARTMENT OR POLICE STATION PREMISES?

Follow the policy on child abuse and/or neglect, reporting to the local office of DHS’ Children’s Protective Services and appropriate law enforcement.

13. WHAT IF THE PARENT(S) RETURNS TO THE HOSPITAL, FIRE DEPARTMENT OR POLICE STATION FOLLOWING SURRENDER AND REQUESTS THE RETURN OF THE NEWBORN?

The newborn should not be returned to the parent(s) under these circumstances. Personnel should advise the parent(s) of their right to file an action in Circuit Court, Family Division for custody of the newborn within 28 days following surrender.



FREQUENTLY ASKED QUESTIONS

14. WHAT CIRCUIT COURT, FAMILY DIVISION DOES THE SURRENDERING PARENT(S) FILE FOR CUSTODY IF, AFTER SURRENDER, THEY WISH TO DO SO?

- ✓ The county in which the newborn is located, if the parent(s) has located the newborn.
- ✓ The county in which the ESP is located, if the parent(s) has not located the newborn but knows the location of the ESP to whom the newborn was surrendered.
- ✓ The county in which the parent(s) is located, if the parent(s) has not located the newborn and does not know the location of the ESP to whom the newborn was surrendered.

15. I AM AN ESP, ARE THERE OPERATING GUIDELINES AVAILABLE FOR REVIEW?

In 2000, the Michigan Association of Fire Chiefs and the Fire Marshal Division of the Department of State Police developed and distributed a model Standard Operating Guideline (SOG) to all fire departments. The Michigan Department of State Police developed policy on the Safe Delivery of Newborns Act that is available to law enforcement agencies upon request. The Michigan Health and Hospital Association has also developed policy on the Safe Delivery of Newborns Act which is available to hospitals by calling: 517-703-8601. A *Response and Resource Handbook* has been developed for emergency service providers that includes the tools and information necessary to ensure a successful surrender of a newborn. It is available in hard copy or it can be downloaded from the DHS Web site. To order a copy of the handbook call 517-324-7330.

16. THE LAW INDICATES THAT THE NEWBORN SURRENDERED AT A FIRE DEPARTMENT OR POLICE STATION MUST BE TRANSFERRED TO THE HOSPITAL. HOW SHOULD THIS BE DONE?

The newborn should be transported to the hospital. Personnel are to transfer temporary protective custody of the newborn to the hospital staff.

17. HOW ARE FIRE AND POLICE PERSONNEL TO TRANSPORT A SURRENDERED NEWBORN TO THE HOSPITAL?

The transporting of a surrendered newborn to the hospital by fire and police personnel is not addressed in statute. Personnel are encouraged to contact their respective areas for protocol and/or procedures. Note: The Michigan Association of Fire Chiefs and Fire Marshal Division of the Department of State Police developed and distributed a model Standard Operating Guideline in 2000.

18. SHOULD THE INITIAL CLINICAL ASSESSMENT OF THE NEWBORN, AT THE HOSPITAL, INCLUDE A COMPLETE PHYSICAL EXAMINATION?

Initially, a nurse and/or physician in the emergency department should conduct a brief clinical assessment to determine if signs of abuse and/or neglect are present. A more complete clinical assessment by the emergency room physician should follow. Results of the complete clinical examination should be documented, including the estimated age of the newborn, results of the physical examination and recommended care plan.

19. WHAT SHOULD BE DONE IF, DURING THE HOSPITAL'S CLINICAL ASSESSMENT, SIGNS OF ABUSE AND/OR NEGLECT ARE PRESENT?

If the physician examining the newborn has reason to suspect that the newborn has experienced abuse and/or neglect (for reason other than being surrendered to an ESP) the physician must immediately report to the local office of DHS' Children's Protective Services and file A Report of Actual or Suspected Child Abuse or Neglect (DHS Form 3200).

20. DOES THE HOSPITAL HAVE TO OBTAIN WRITTEN CONSENT TO TREAT AND/OR TRANSFER THE NEWBORN?

No.



FREQUENTLY ASKED QUESTIONS

21. IS IT LEGALLY RISKY FOR ESP TO ACCEPT THESE SURRENDERED NEWBORNS?

No. Unless the staff acts with gross negligence or willful or wanton misconduct, their actions in accepting or transferring a newborn are immune from civil damages.

22. IS IT LEGALLY RISKY FOR A PARENT(S) TO SURRENDER A NEWBORN TO AN ESP?

It is the intent of this legislation that if a parent(s) surrendered the newborn to an ESP and no abuse and/or neglect is present, a criminal investigation would not be initiated solely on the basis of the newborn being surrendered to an ESP.

23. WILL THE SURRENDERED NEWBORN BE ELIGIBLE FOR MEDICAID?

An application for medicaid may be made for newborns surrendered under the Safe Delivery of Newborns Law by the provider hospital, child placing agency, court appointed lawyer guardian ad litem, or prospective adoptive parent. Assistance in applying for medicaid can be obtained from a local DHS office.

24. DOES THE LAW AUTHORIZE APPROPRIATIONS SO THE ESP, PHYSICIANS AND OTHER CAREGIVERS ARE PAID FOR SERVICES RENDERED PURSUANT TO THIS LAW?

There were no appropriations made specifically to compensate the ESP for services rendered.

25. WHO APPLIES FOR THE BIRTH REGISTRATION FOR THE NEWBORN?

Hospital personnel will complete the birth registration form for newborns who are delivered and surrendered in the hospital. For all other surrenders, the child placing agency will make application for the birth registration. Reporting of the birth will be handled as a “foundling” registration. The birth certificate must be completed and filed with the state registrar within five (5) days after assuming custody of the newborn. For assistance or questions regarding the procedures for birth registration, contact the Registration Unit, Office of Vital Records and Health Statistics, Michigan Department of Community Health at 517-335-8684.

26. FOLLOWING AN EXAMINATION AT A HOSPITAL AND IF THE NEWBORN IS UNHARMED, WHAT IS THE NEXT STEP FOR THE HOSPITAL?

The hospital must notify a child placing agency for placement.

27. WHERE DOES THE HOSPITAL OBTAIN A LISTING OF CHILD PLACING AGENCIES THAT HANDLE ADOPTIONS?

A listing of Michigan private adoption agencies that will provide a placement for a surrendered newborn in an approved adoptive home is available at the DHS Web site or in the *Safe Delivery Response and Resource Handbook*.

28. WHAT ARE THE RESPONSIBILITIES OF A CHILD PLACING AGENCY THAT HAS TAKEN A NEWBORN UNDER THIS LAW?

- ✓ Immediately assume the care, control and temporary protective custody of newborn.
- ✓ If the parent(s) is known and willing, immediately meet with the parent(s).
- ✓ Make a temporary placement of the newborn with a prospective adoptive parent who has an approved preplacement assessment.
- ✓ Immediately request assistance from law enforcement officials to investigate and determine whether the newborn is a missing child through Michigan’s Missing Children’s Information Clearinghouse as well as the National Center for Missing and Exploited Children.



FREQUENTLY ASKED QUESTIONS

- ✓ Within 48 hours after transferring physical custody to a prospective adoptive parent, petition the court for authority to place and provide care for the newborn.
- ✓ Within 28 days make reasonable effort to identify and locate the non-surrendering parent. If that parent's identity and address are unknown, the child placing agency must provide notice of the surrender by publication.

29. WHAT ARE THE LISTINGS FOR THE MICHIGAN MISSING CHILDREN'S INFORMATION CLEARINGHOUSE AND THE NATIONAL CENTER FOR MISSING AND EXPLOITED CHILDREN?

Michigan State Police
Prevention Services Section
4000 Collins Road
Lansing, MI 48909-8134
Telephone Number 1-800-525-5555
Fax 517-333-4115

The National Center for Missing and Exploited Children Information Clearinghouse telephone number is 1-800-THE LOST (843-5678).

A child placing agency who assumes temporary protective custody of a surrendered newborn is required to immediately notify Michigan's Missing Children's Information Clearinghouse to determine if the child is a victim of abduction.

30. THE CHILD PLACING AGENCY ASSUMING TEMPORARY PROTECTIVE CUSTODY OF THE NEWBORN MUST SUPPLY THE INFORMATION NECESSARY TO ESTABLISH A BIRTH REGISTRATION FOR THE CHILD EXCEPT FOR NEWBORNS SURRENDERED FOLLOWING A HOSPITAL BIRTH. IS THERE A FORM AVAILABLE THAT CAN BE USED FOR THIS PURPOSE?

The agency may use "Certificate of Live Birth", Michigan Department of Community Health form DCH-0481.

31. THE CHILD PLACING AGENCY THAT HAS TEMPORARY PROTECTIVE CUSTODY OF A NEWBORN UNDER THE SAFE DELIVERY OF NEWBORNS ACT WILL BE REQUIRED TO COMPLETE COURT FORMS. WHAT FORMS HAVE BEEN DEVELOPED AND HOW DOES THE AGENCY ACCESS THEM?

The State Court Administrator's Office has approved forms to be used related to the surrendered newborn. These forms are available from the Family Division of Circuit Court. They are also available online at www.courts.Michigan.gov/SCAO/CourtForms. For easy reference, the form numbers and titles have been provided:

- ✓ CCFD-01 Petition for Placement Order of Surrendered Newborn Child
- ✓ CCFD-02 Order Placing Surrendered Newborn with Prospective Adoptive Parents
- ✓ CCFD-03 Petition of Parent for Custody of Surrendered Newborn Child
- ✓ CCFD-04 Order for Blood or Tissue Typing or DNA Profile
- ✓ CCFD-05 Motion Objecting to DNA Identification Profile or Blood/Tissue Typing Summary Report
- ✓ CCFD-06 Order Determining Custody of Surrendered Newborn Child



FREQUENTLY ASKED QUESTIONS

- 32. A CHILD PLACING AGENCY THAT HAS TEMPORARY CUSTODY OF A NEWBORN UNDER THE SAFE DELIVERY OF NEWBORNS ACT IS REQUIRED TO, WITHIN 28 DAYS, MAKE REASONABLE EFFORTS TO IDENTIFY AND LOCATE THE NON-SURRENDERING PARENT. IF THE IDENTITY AND ADDRESS OF THAT PARENT IS UNKNOWN, THE AGENCY IS TO PROVIDE NOTICE BY PUBLICATION IN A NEWSPAPER OF GENERAL CIRCULATION IN THE COUNTY WHERE THE NEWBORN WAS SURRENDERED. HOW WOULD SUCH A PUBLICATION READ?**

While there is no specific language developed, the following is an example of a notification relating to a surrendered newborn:

State of Michigan,
(Name of court) Circuit Court, Family Division
Publication of Notice
Safe Delivery of Newborns (MCL712.1)

To: Birth Father and Birth Mother of Said Minor Child In the Matter of: Newborn Baby, Born and surrendered on (list date, time, hospital, city & state), Take Notice: by surrendering your newborn, you are releasing your newborn to a child placing agency to be placed for adoption. You have until (list date – 28 days from the surrender of the child) to petition the court to regain custody of your child. After the 28 days there will be a hearing to terminate your parental rights. There will be a public notice of this hearing; however the notice will not contain your names. You will not receive personal notice of the hearing. You, as the parent(s), can call (list agency with phone number and, if required, the court's information) for further information.

- 33. WHERE CAN I GET MORE INFORMATION ABOUT THE SAFE DELIVERY LAW?**

The following acts are available for review at www.michigan.gov/dhs, click on Safe Delivery icon under the heading: Laws.

Act No. 232, PA 2000 (SB 1052, 1999-2000)
Act No. 233, PA 2000 (SB 1053, 1999-2000)
Act No. 234, PA 2000 (SB 1187, 1999-2000)
Act No. 235, PA 2000 (HB 5543, 1999-2000)

- 34. WHAT STEPS IS THE CHILD PLACING AGENCY WITH TEMPORARY PROTECTIVE CUSTODY OF THE NEWBORN EXPECTED TO TAKE TO NOTIFY THE DEPARTMENT OF HUMAN SERVICES OF A SAFE DELIVERY OF NEWBORNS PLACEMENT?**

The agency is to complete Safe Delivery of Newborns Tracking Information (DHS Form 850) available at www.michigan.gov/dhs. This form must be forwarded to the Adoption Services Division of the Department of Human Services for tracking purposes.

Mailing address:	Contact numbers:
DHS Adoption Services Division	Fax 517-335-4019
PO Box 30037 Suite 412	Phone 517-373-3513
Lansing, MI 48909	



SUMMARY OF SAFE DELIVERY OF NEWBORNS LAW

On June 26, 2000 Michigan enacted the Safe Delivery of Newborns law with an effective date of January 1, 2001.

Act No. 232, PA 2000 (SB 1052, 1999-2000) Included in the *Response and Resource Handbook*.

Added the Safe Delivery of Newborns Law, Chapter XII to the Probate Code and amended the Juvenile Code, Chapter XIIIA of the Probate Code.

Act No. 233, PA 2000 (SB 1053, 1999-2000)

Amended the Penal Code to provide an affirmative defense to a child abandonment prosecution if the child is not more than 72 hours old and was surrendered to an emergency service provider.

Act No. 234, PA 2000 (SB 1187, 1999-2000) Included in the *Response and Resource Handbook*.

Amends the Child Protection Law specifying that the act of surrendering a child to an emergency service provider is not a reasonable cause to suspect child abuse and/or neglect and the physician is not required to report the surrender unless there are actual signs of abuse and/or neglect. New Section 8 (16) on page 3.

Act No. 235, PA 2000 (HB 5543, 1999-2000)

Added provisions to Chapter XII of the Probate Code to establish a Safe Delivery program, which must include a toll free number and a pamphlet about the program.

Michigan Compiled Laws (712.1-712.20)

Section 712.1	Short title of chapter; definitions.
Section 712.2	Newborn surrendered to emergency service provider; court jurisdiction; effect of other provisions of law; immunity from civil action.
Section 712.3	Conduct of emergency service provider.
Section 712.5	Transfer of newborn to hospital; physician report of abuse, neglect, or child not a newborn; notice to child placing agency.
Section 712.7	Duties of child placing agency.
Section 712.10	Custody action by biological parent; filing; hearing.
Section 712.11	Blood or tissue typing or DNA identification profiling; court order in custody hearing; compensation of expert.
Section 712.12	Blood or tissue typing or DNA identification profile; summary report of result; objection; admissibility; presumption of paternity or maternity.
Section 712.13	Information obtained from genetic testing; disclosure of information; retention or destruction of genetic testing material; records; verification of compliance of contracting laboratory; audit; violation as misdemeanor; penalty.
Section 712.14	Determination of custody; basis; newborn's best interest; factors.
Section 712.15	Court order.
Section 712.17	Release or termination of parental rights.
Section 712.20	Safe delivery program; establishment.

For a copy of the 2000 Public Acts go to the following Web site:

<http://www.swmsystemsinc.org/legislation/PA> (type in the act # here).htm

For updates following enactment of Safe Delivery of Newborn law go to the following Web site:

www.legislature.mi.gov. Click on: Michigan Compiled Laws Search; Enter: MCL 712.1 – 712.20



PUBLIC ACT 232

Act No. 232
Public Acts of 2000
Approved by the Governor
June 26, 2000
Filed with the Secretary of State
June 27, 2000
EFFECTIVE DATE: January 1, 2001

STATE OF MICHIGAN 90TH LEGISLATURE REGULAR SESSION OF 2000

Introduced by Senators Johnson, Emmons and Hammerstrom

ENROLLED SENATE BILL No. 1052

AN ACT to amend 1939 PA 288, entitled “An act to revise and consolidate the statutes relating to certain aspects of the family division of circuit court, to the jurisdiction, powers, and duties of the family division of circuit court and its judges and other officers, to the change of name of adults and children, and to the adoption of adults and children; to prescribe certain jurisdiction, powers, and duties of the family division of circuit court and its judges and other officers; to prescribe the manner and time within which certain actions and proceedings may be brought in the family division of the circuit court; to prescribe pleading, evidence, practice, and procedure in certain actions and proceedings in the family division of circuit court; to provide for appeals from certain actions in the family division of circuit court; to prescribe the powers and duties of certain state departments, agencies, and officers; and to provide remedies and penalties,” by amending the title and section 19b of chapter XIIA (MCL 712A.19b), the title as amended by 1997 PA 163 and section 19b of chapter XIIA as amended by 2000 PA 46, and by adding chapter XII.

The People of the State of Michigan enact:

TITLE

An act to revise and consolidate the statutes relating to certain aspects of the family division of circuit court, to the jurisdiction, powers, and duties of the family division of circuit court and its judges and other officers, to the change of name of adults and children, and to the adoption of adults and children; to prescribe certain jurisdiction, powers, and duties of the family division of circuit court and its judges and other officers; to prescribe the manner and time within which certain actions and proceedings may be brought in the family division of the circuit court; to prescribe pleading, evidence, practice, and procedure in certain actions and proceedings in the family division of circuit court; to provide for appeals from certain actions in the family division of circuit court; to prescribe the powers and duties of certain state departments, agencies, and officers; to provide for certain immunity from liability; and to provide remedies and penalties.

CHAPTER XII

SAFE DELIVERY OF NEWBORNS

Sec. 1. (1) This chapter shall be known and may be cited as the “safe delivery of newborns law”.

(2) As used in this chapter:

- (a) “Child placing agency” means that term as defined in section 1 of 1973 PA 116, MCL 722.111.
- (b) “Court” means the family division of circuit court.
- (c) “Department” means the family independence agency.



- (d) “Domestic violence” means that term as defined in section 1 of 1978 PA 389, MCL 400.1501.
- (e) “Emergency service provider” means a uniformed or otherwise identified employee or contractor of a fire department, hospital, or police station when such an individual is inside the premises and on duty.
- (f) “Fire department” means an organized fire department as that term is defined in section 1 of the fire prevention code, 1941 PA 207, MCL 29.1.
- (g) “Gross negligence” means conduct so reckless as to demonstrate a substantial lack of concern for whether an injury results.
- (h) “Hospital” means a hospital that is licensed under article 17 of the public health code, 1978 PA 368, MCL 333.20101 to 333.22260.
- (i) “Lawyer-guardian ad litem” means an attorney appointed under section 2 of this chapter. A lawyer-guardian ad litem represents the newborn, and has the powers and duties, as set forth in section 17d of chapter XIII.A.
- (j) “Newborn” means a child who a physician reasonably believes to be not more than 72 hours old.
- (k) “Police station” means that term as defined in section 43 of the Michigan vehicle code, 1949 PA 300, MCL 257.43.
- (l) “Preplacement assessment” means an assessment of a prospective adoptive parent as described in section 23f of chapter X.
- (m) “Surrender” means to leave a newborn with an emergency service provider without expressing an intent to return for the newborn.

Sec. 2. (1) The court has jurisdiction over a newborn who is surrendered to an emergency service provider as provided in section 3 of this chapter. The court may appoint a lawyer-guardian ad litem to represent a newborn in proceedings under this chapter.

(2) Except as provided in section 5 of this chapter, the reporting requirement of section 3 of the child protection law, 1975 PA 238, MCL 722.623, does not apply regarding a child surrendered to an emergency service provider as provided in section 3 of this chapter.

(3) Unless this chapter specifically provides otherwise, a provision in another chapter of this act does not apply to a proceeding under this chapter. Unless this chapter specifically provides otherwise, the child custody act of 1970, 1970 PA 91, MCL 722.21 to 722.30, does not apply to a proceeding under this chapter.

(4) A hospital and a child placing agency, and their agents and employees, are immune in a civil action for damages for an act or omission in accepting or transferring a newborn under this chapter, except for an act or omission constituting gross negligence or willful or wanton misconduct. To the extent not protected by the immunity conferred by 1964 PA 170, MCL 691.1401 to 691.1415, an employee or contractor of a fire department or police station has the same immunity that this subsection provides to a hospital’s or child placing agency’s agent or employee.

Sec. 3. (1) If a parent surrenders a child who may be a newborn to an emergency service provider, the emergency service provider shall comply with the requirements of this section under the assumption that the child is a newborn. The emergency service provider shall, without a court order, immediately accept the newborn, taking the newborn into temporary protective custody. The emergency service provider shall make a reasonable effort to do all of the following:

- (a) Take action necessary to protect the physical health and safety of the newborn.
- (b) Inform the parent that by surrendering the newborn, the parent is releasing the newborn to a child placing agency to be placed for adoption.
- (c) Inform the parent that the parent has 28 days to petition the court to regain custody of the newborn.
- (d) Provide the parent with written material approved by or produced by the family independence agency that includes, but is not limited to, all of the following statements:
 - (i) By surrendering the newborn, the parent is releasing the newborn to a child placing agency to be placed for adoption.
 - (ii) The parent has 28 days after surrendering the newborn to petition the court to regain custody of the newborn.
 - (iii) After the 28-day period to petition for custody elapses, there will be a hearing to terminate parental rights.
 - (iv) There will be public notice of this hearing, and the notice will not contain the parent’s name.
 - (v) The parent will not receive personal notice of this hearing.
 - (vi) Information the parent provides to an emergency service provider will not be made public.
 - (vii) A parent can contact the safe delivery line established under section 20 of this chapter for more information.
- (2) After providing a parent with the information described in subsection (1), an emergency service provider shall make a reasonable attempt to do all of the following:
 - (a) Encourage the parent to provide any relevant family or medical information.



(b) Provide the parent with the pamphlet produced under section 20 of this chapter and inform the parent that he or she can receive counseling or medical attention.

(c) Inform the parent that information that he or she provides will not be made public.

(d) Ask the parent to identify himself or herself.

(e) Inform the parent that in order to place the newborn for adoption the state is required to make a reasonable attempt to identify the other parent, and then ask the parent to identify the other parent.

(f) Inform the parent that the child placing agency that takes temporary protective custody of the newborn can provide confidential services to the parent.

(g) Inform the parent that the parent may sign a release for the newborn to be used at the parental rights termination hearing.

Sec. 5. (1) An emergency service provider that is not a hospital and that takes a newborn into temporary protective custody under section 3 of this chapter shall transfer the newborn to a hospital. The hospital shall accept a newborn who an emergency service provider transfers to the hospital in compliance with this chapter, taking the newborn into temporary protective custody.

(2) A hospital that takes a newborn into temporary protective custody under this chapter shall have the newborn examined by a physician. If a physician who examines the newborn either determines that there is reason to suspect the newborn has experienced child abuse or child neglect, other than being surrendered to an emergency service provider under section 3 of this chapter, or comes to a reasonable belief that the child is not a newborn, the physician shall immediately report to the department as required by section 3 of the child protection law, 1975 PA 238, MCL 722.623.

(3) If a physician is not required to report to the department as provided in subsection (2), the hospital shall notify a child placing agency that the hospital has taken a newborn into temporary protective custody under this chapter.

Sec. 7. Upon receipt of notice from a hospital under section 5 of this chapter, the child placing agency shall do all of the following:

(a) Immediately assume the care, control, and temporary protective custody of the newborn.

(b) If a parent is known and willing, immediately meet with the parent.

(c) Make a temporary placement of the newborn with a prospective adoptive parent who has an approved preplacement assessment and resides within the state.

(d) Immediately request assistance from law enforcement officials to investigate and determine, through the missing children information clearinghouse, the national center for missing and exploited children, and any other national and state resources, whether the newborn is a missing child.

(e) Not later than 48 hours after a transfer of physical custody to a prospective adoptive parent, petition the court in the county in which the prospective adoptive parent resides to provide authority to place the newborn and provide care for the newborn. The petition shall include all of the following:

(i) The date of the transfer of physical custody.

(ii) The name and address of the emergency service provider to whom the newborn was surrendered.

(iii) Any information, either written or verbal, that was provided by and to the parent who surrendered the newborn. The emergency service provider that originally accepted the newborn as required by section 3 of this chapter shall provide this information to the child placing agency.

(f) Within 28 days, make reasonable efforts to identify and locate a parent who did not surrender the newborn. If the identity and address of that parent are unknown, the child placing agency shall provide notice by publication in a newspaper of general circulation in the county where the newborn was surrendered.

Sec. 10. (1) If a biological parent wants custody of a newborn who was surrendered under section 3 of this chapter, the parent must, within 28 days after the newborn was surrendered, file an action with the court for custody. The parent shall file the custody action in 1 of the following counties:

(a) If the parent has located the newborn, the county where the newborn is located.

(b) If subdivision (a) does not apply and the parent knows the location of the emergency service provider to whom the newborn was surrendered, the county where the emergency service provider is located.

(c) If neither subdivision (a) nor (b) apply, the county where the parent is located.

(2) Before holding a custody hearing in an action filed under this section, the court shall determine whether the individual filing the custody action is the newborn's biological parent.

Sec. 11. (1) In a custody action filed under this chapter, the court shall order that each party claiming paternity or maternity and the child submit to blood or tissue typing determinations, which may include, but are not limited to,



determinations of red cell antigens, red cell isoenzymes, human leukocyte antigens, serum proteins, or DNA identification profiling, to determine whether each party is likely to be, or is not, a biological parent of the child. If the court orders a blood or tissue typing or DNA identification profiling to be conducted and a party refuses to submit to the typing or DNA identification profiling, in addition to any other remedies available, the court may do either of the following:

- (a) Dismiss the custody action in regard to the party who refuses.
- (b) If a hearing is held, allow the disclosure of the fact of the refusal unless good cause is shown for not disclosing the fact of refusal.

(2) A blood or tissue typing or DNA identification profiling shall be conducted by a person accredited for paternity or maternity determinations by a nationally recognized scientific organization, including, but not limited to, the American association of blood banks.

(3) The court shall fix the compensation of an expert at a reasonable amount. Except for an individual who the court determines is indigent, the court shall direct each party claiming paternity or maternity to pay the compensation for his or her own testing plus a portion of the compensation for testing the child equal to the total amount divided by the number of parties claiming paternity and maternity. Before blood or tissue typing or DNA identification profiling is conducted, the court may order a part or all of the compensation paid in advance. Documentation of the genetic testing expenses is admissible as evidence of the amount, which evidence constitutes prima facie evidence of the amount of those expenses without third party foundation testimony.

Sec. 12. (1) Subject to subsection (2), the result of blood or tissue typing or a DNA identification profile made under this chapter and the summary report shall be served on the party who was the test subject. The summary report shall be filed with the court. Objection to the DNA identification profile or summary report is waived unless made in writing, setting forth the specific basis for the objection, within 14 calendar days after service on the party. The court shall not schedule a hearing on the issue of paternity or maternity until after the expiration of the 14-day period. If an objection is not filed, the court shall admit in proceedings under this chapter the result of the blood or tissue typing or the DNA identification profile and the summary report without requiring foundation testimony or other proof of authenticity or accuracy. If an objection is filed within the 14-day period and on the motion of a party, the court shall hold a hearing to determine the admissibility of the DNA identification profile or summary report. The objecting party has the burden of proving by clear and convincing evidence by a qualified person described in section 11 of this chapter that foundation testimony or other proof of authenticity or accuracy is necessary for admission of the DNA identification profile or summary report.

(2) If the probability of paternity or maternity determined by the qualified person described in section 11 of this chapter conducting the blood or tissue typing or DNA identification profiling is 99% or higher, and the DNA identification profile and summary report are admissible as provided in subsection (1), paternity or maternity is presumed. If the results of the analysis of genetic testing material from 2 or more persons indicate a probability of paternity or maternity greater than 99%, the contracting laboratory shall conduct additional genetic testing until all but 1 of the putative fathers or putative mothers is eliminated, unless the dispute involves 2 or more putative fathers or putative mothers who have identical DNA.

(3) Upon the establishment of the presumption of paternity or maternity as provided in subsection (2), the party who has the benefit of the presumption may move for summary disposition under the court rules on the issue of his paternity or her maternity.

Sec. 13. (1) Except as authorized under this chapter, a person shall not disclose information obtained from genetic testing that is authorized under this chapter.

(2) If a party who is tested as part of an action under this chapter is found to be the child's biological parent, the contracting laboratory shall retain the genetic testing material of the parent and the child for no longer than the period of years prescribed by the national standards under which the laboratory is accredited. If a party is found not to be the child's biological parent, the contracting laboratory shall destroy the party's genetic testing material after it is used in the action, in compliance with section 13811 of the public health code, 1978 PA 368, MCL 333.13811, and in the presence of a witness. The witness may be an individual who is a party to the destruction of the genetic testing material. After the genetic testing material is destroyed, the contracting laboratory shall make and keep a written record of the destruction and have the individual who witnessed the destruction sign the record. The contracting laboratory shall also expunge the contracting laboratory's records regarding the genetic testing performed on the genetic testing material in accordance with the national standards under which the laboratory is accredited. The contracting laboratory shall retain the genetic testing material of the child for no longer than the period of years prescribed by the national standards under which the laboratory is accredited. After a contracting laboratory destroys an individual's genetic testing material as provided in this subsection, it shall notify the adult individual, or the parent or legal guardian of a minor individual, by certified mail that the genetic testing material was destroyed.



(3) A contracting laboratory or another entity involved with the genetic testing are all required to protect the confidentiality of genetic testing material, except as required for a paternity or maternity determination under this chapter. The court and its officers shall not use or disclose genetic testing material for a purpose other than the paternity or maternity determination as authorized by this chapter.

(4) A person shall not sell, transfer, or offer genetic testing material obtained under this chapter except as authorized by this chapter.

(5) A contracting laboratory shall annually cause to be conducted an independent audit verifying the contracting laboratory's compliance with this section and sections 11 and 12 of this chapter. The audit shall not disclose the names of, or otherwise identify, the test subjects required to submit to blood or tissue typing or DNA identification profiling under section 11 of this chapter during the previous year. The contracting laboratory shall forward the audit to the department of consumer and industry services.

(6) A violation of this section is a misdemeanor punishable by a fine of not more than \$5,000.00. A second or subsequent violation of this section is a misdemeanor punishable by imprisonment for not more than 1 year or a fine of not more than \$10,000.00, or both.

Sec. 14. (1) In a custody action under this chapter, the court shall determine custody of the newborn based on the newborn's best interest. The court shall consider, evaluate, and make findings on each factor of the newborn's best interest with the goal of achieving permanence for the newborn at the earliest possible date.

(2) A newborn's best interest in a custody action under this chapter is all of the following factors regarding a parent claiming parenthood of the newborn:

- (a) The love, affection, and other emotional ties existing between the newborn and the parent.
- (b) The parent's capacity to give the newborn love, affection, and guidance.
- (c) The parent's capacity and disposition to provide the newborn with food, clothing, medical care, or other remedial care recognized and permitted under the laws of this state in place of medical care, and other material needs.
- (d) The permanence, as a family unit, of the existing or proposed custodial home.
- (e) The parent's moral fitness.
- (f) The parent's mental and physical health.
- (g) Whether the parent has a history of domestic violence.
- (h) If the parent is not the parent who surrendered the newborn, the opportunity the parent had to provide appropriate care and custody of the newborn before the newborn's birth or surrender.
- (i) Any other factor considered by the court to be relevant to the determination of the newborn's best interest.

Sec. 15. Based on the court's finding of the newborn's best interest under section 14 of this chapter, the court may issue an order that does 1 of the following:

- (a) Grants legal or physical custody, or both, of the newborn to the parent, and either retains or relinquishes jurisdiction.
- (b) Terminates the parent's parental rights and gives a child placing agency custody and care of the newborn.

Sec. 17. (1) A parent who surrenders a newborn under section 3 of this chapter and who does not file a custody action under section 10 of this chapter is presumed to have knowingly released his or her parental rights to the newborn.

(2) If a custody action is not filed under section 10 of this chapter, the child placing agency shall petition the court for termination of parental rights under section 19b of chapter XIIA. If the agency has complied with section 7(f) of this chapter, the notice under that section is the notice to the newborn's parents required by section 19b of chapter XIIA.

CHAPTER XIIA

JURISDICTION, PROCEDURE, AND DISPOSITIONS INVOLVING MINORS

Sec. 19b. (1) Except as provided in subsection (4), if a child remains in foster care in the temporary custody of the court following a review hearing under section 19(3) of this chapter or a permanency planning hearing under section 19a of this chapter or if a child remains in the custody of a guardian or limited guardian, upon petition of the prosecuting attorney, whether or not the prosecuting attorney is representing or acting as legal consultant to the agency or any other party, or petition of the child, guardian, custodian, concerned person as defined in subsection (6), agency, or children's ombudsman as authorized in section 7 of the children's ombudsman act, 1994 PA 204, MCL 722.927, the court shall hold a hearing to determine if the parental rights to a child should be terminated and, if all parental rights to the child are terminated, the child placed in permanent custody of the court. The court shall state on the record or in writing its findings of fact and conclusions of law with respect to whether or not parental rights should be terminated. The court



shall issue an opinion or order regarding a petition for termination of parental rights within 70 days after the commencement of the initial hearing on the petition. However, the court's failure to issue an opinion within 70 days does not dismiss the petition.

(2) Not less than 14 days before a hearing to determine if the parental rights to a child should be terminated, written notice of the hearing shall be served upon all of the following:

- (a) The agency. The agency shall advise the child of the hearing if the child is 11 years of age or older.
- (b) The child's foster parent or custodian.
- (c) The child's parents.
- (d) If the child has a guardian, the child's guardian.
- (e) If the child has a guardian ad litem, the child's guardian ad litem.
- (f) If tribal affiliation has been determined, the Indian tribe's elected leader.
- (g) The child's attorney and each party's attorney.
- (h) If the child is 11 years of age or older, the child.
- (i) The prosecutor.

(3) The court may terminate a parent's parental rights to a child if the court finds, by clear and convincing evidence, 1 or more of the following:

(a) The child has been deserted under any of the following circumstances:

(i) The child's parent is unidentifiable, has deserted the child for 28 or more days, and has not sought custody of the child during that period. For the purposes of this section, a parent is unidentifiable if the parent's identity cannot be ascertained after reasonable efforts have been made to locate and identify the parent.

(ii) The child's parent has deserted the child for 91 or more days and has not sought custody of the child during that period.

(iii) The child's parent voluntarily surrendered the child to an emergency service provider under chapter XII and did not petition the court to regain custody within 28 days after surrendering the child.

(b) The child or a sibling of the child has suffered physical injury or physical or sexual abuse under 1 or more of the following circumstances:

(i) The parent's act caused the physical injury or physical or sexual abuse and the court finds that there is a reasonable likelihood that the child will suffer from injury or abuse in the foreseeable future if placed in the parent's home.

(ii) The parent who had the opportunity to prevent the physical injury or physical or sexual abuse failed to do so and the court finds that there is a reasonable likelihood that the child will suffer injury or abuse in the foreseeable future if placed in the parent's home.

(iii) A nonparent adult's act caused the physical injury or physical or sexual abuse and the court finds that there is a reasonable likelihood that the child will suffer from injury or abuse by the nonparent adult in the foreseeable future if placed in the parent's home.

(c) The parent was a respondent in a proceeding brought under this chapter, 182 or more days have elapsed since the issuance of an initial dispositional order, and the court, by clear and convincing evidence, finds either of the following:

(i) The conditions that led to the adjudication continue to exist and there is no reasonable likelihood that the conditions will be rectified within a reasonable time considering the child's age.

(ii) Other conditions exist that cause the child to come within the court's jurisdiction, the parent has received recommendations to rectify those conditions, the conditions have not been rectified by the parent after the parent has received notice and a hearing and has been given a reasonable opportunity to rectify the conditions, and there is no reasonable likelihood that the conditions will be rectified within a reasonable time considering the child's age.

(d) The child's parent has placed the child in a limited guardianship under section 5205 of the estates and protected individuals code, 1998 PA 386, MCL 700.5205, and has substantially failed, without good cause, to comply with a limited guardianship placement plan described in section 5205 of the estates and protected individuals code, 1998 PA 386, MCL 700.5205, regarding the child to the extent that the noncompliance has resulted in a disruption of the parent-child relationship.

(e) The child has a guardian under the estates and protected individuals code, 1998 PA 386, MCL 700.1101 to 700.8102, and the parent has substantially failed, without good cause, to comply with a court-structured plan described in section 5207 or 5209 of the estates and protected individuals code, 1998 PA 386, MCL 700.5207 and 700.5209, regarding the child to the extent that the noncompliance has resulted in a disruption of the parent-child relationship.



(f) The child has a guardian under the estates and protected individuals code, 1998 PA 386, MCL 700.1101 to 700.8102, and both of the following have occurred:

(i) The parent, having the ability to support or assist in supporting the minor, has failed or neglected, without good cause, to provide regular and substantial support for the minor for a period of 2 years or more before the filing of the petition or, if a support order has been entered, has failed to substantially comply with the order for a period of 2 years or more before the filing of the petition.

(ii) The parent, having the ability to visit, contact, or communicate with the minor, has regularly and substantially failed or neglected, without good cause, to do so for a period of 2 years or more before the filing of the petition.

(g) The parent, without regard to intent, fails to provide proper care or custody for the child and there is no reasonable expectation that the parent will be able to provide proper care and custody within a reasonable time considering the child's age.

(h) The parent is imprisoned for such a period that the child will be deprived of a normal home for a period exceeding 2 years, and the parent has not provided for the child's proper care and custody, and there is no reasonable expectation that the parent will be able to provide proper care and custody within a reasonable time considering the child's age.

(i) Parental rights to 1 or more siblings of the child have been terminated due to serious and chronic neglect or physical or sexual abuse, and prior attempts to rehabilitate the parents have been unsuccessful.

(j) There is a reasonable likelihood, based on the conduct or capacity of the child's parent, that the child will be harmed if he or she is returned to the home of the parent.

(k) The parent abused the child or a sibling of the child and the abuse included 1 or more of the following:

(i) Abandonment of a young child.

(ii) Criminal sexual conduct involving penetration, attempted penetration, or assault with intent to penetrate.

(iii) Battering, torture, or other severe physical abuse.

(iv) Loss or serious impairment of an organ or limb.

(v) Life threatening injury.

(vi) Murder or attempted murder.

(vii) Voluntary manslaughter.

(viii) Aiding and abetting, attempting to commit, conspiring to commit, or soliciting murder or voluntary manslaughter.

(l) The parent's rights to another child were terminated as a result of proceedings under section 2(b) of this chapter or a similar law of another state.

(m) The parent's rights to another child were voluntarily terminated following the initiation of proceedings under section 2(b) of this chapter or a similar law of another state.

(n) The parent is convicted of 1 or more of the following, and the court determines that termination is in the child's best interests because continuing the parent-child relationship with the parent would be harmful to the child:

(i) A violation of section 316, 317, 520b, 520c, 520d, 520e, or 520g of the Michigan penal code, 1931 PA 328, MCL 750.316, 750.317, 750.520b, 750.520c, 750.520d, 750.520e, and 750.520g.

(ii) A violation of a criminal statute, an element of which is the use of force or the threat of force, and which subjects the parent to sentencing under section 10, 11, or 12 of chapter IX of the code of criminal procedure, 1927 PA 175, MCL 769.10, 769.11, and 769.12.

(iii) A federal law or law of another state with provisions substantially similar to a crime or procedure listed or described in subparagraph (i) or (ii).

(4) If a petition to terminate the parental rights to a child is filed, the court may enter an order terminating parental rights under subsection (3) at the initial dispositional hearing. If a petition to terminate parental rights to a child is filed, parenting time for a parent who is a subject of the petition is automatically suspended and, except as otherwise provided in this subsection, remains suspended at least until a decision is issued on the termination petition. If a parent whose parenting time is suspended under this subsection establishes, and the court determines, that parenting time will not harm the child, the court may order parenting time in the amount and under the conditions the court determines appropriate.

(5) If the court finds that there are grounds for termination of parental rights, the court shall order termination of parental rights and order that additional efforts for reunification of the child with the parent not be made, unless the court finds that termination of parental rights to the child is clearly not in the child's best interests.

(6) As used in this section, "concerned person" means a foster parent with whom the child is living or has lived who has specific knowledge of behavior by the parent constituting grounds for termination under subsection (3)(b) or (g) and who has contacted the family independence agency, the prosecuting attorney, the child's attorney, and the child's guardian ad litem, if any, and is satisfied that none of these persons intend to file a petition under this section.



PUBLIC ACT 232

Enacting section 1. Section 19b of chapter XIIA of the probate code of 1939, 1939 PA 288, MCL 712A.19b, as amended by this amendatory act, and chapter XII of the probate code of 1939, 1939 PA 288, as added by this amendatory act, do not apply to a proceeding that arises before the effective date of this amendatory act.

Enacting section 2. This amendatory act takes effect January 1, 2001.

Enacting section 3. This amendatory act does not take effect unless all of the following bills of the 90th Legislature are enacted into law:

- (a) Senate Bill No. 1053.
- (b) Senate Bill No. 1187.
- (c) House Bill No. 5543.

This act is ordered to take immediate effect.

Carol Morey Viventi

Secretary of the Senate.

Ray E. Randall

Clerk of the House of Representatives.

Approved _____

Governor.



PUBLIC ACT 234

Act No. 234
Public Acts of 2000
Approved by the Governor
June 26, 2000
Filed with the Secretary of State
June 27, 2000
EFFECTIVE DATE: January 1, 2001

STATE OF MICHIGAN 90TH LEGISLATURE REGULAR SESSION OF 2000

Introduced by Senators Hammerstrom and Johnson

ENROLLED SENATE BILL No. 1187

AN ACT to amend 1975 PA 238, entitled “An act to require the reporting of child abuse and neglect by certain persons; to permit the reporting of child abuse and neglect by all persons; to provide for the protection of children who are abused or neglected; to authorize limited detainment in protective custody; to authorize medical examinations; to prescribe the powers and duties of the state department of social services to prevent child abuse and neglect; to prescribe certain powers and duties of local law enforcement agencies; to safeguard and enhance the welfare of children and preserve family life; to provide for the appointment of legal counsel; to provide for the abrogation of privileged communications; to provide civil and criminal immunity for certain persons; to provide rules of evidence in certain cases; to provide for confidentiality of records; to provide for the expungement of certain records; to prescribe penalties; and to repeal certain acts and parts of acts,” by amending section 8 (MCL 722.628), as amended by 2000 PA 45.

The People of the State of Michigan enact:

Sec. 8. (1) Within 24 hours after receiving a report made under this act, the department shall refer the report to the prosecuting attorney if the report meets the requirements of section 3(6) or shall commence an investigation of the child suspected of being abused or neglected. Within 24 hours after receiving a report whether from the reporting person or from the department under section 3(6), the local law enforcement agency shall refer the report to the department if the report meets the requirements of section 3(7) or shall commence an investigation of the child suspected of being abused or neglected. If the child suspected of being abused is not in the physical custody of the parent or legal guardian and informing the parent or legal guardian would not endanger the child's health or welfare, the agency or the department shall inform the child's parent or legal guardian of the investigation as soon as the agency or the department discovers the identity of the child's parent or legal guardian.

(2) In the course of its investigation, the department shall determine if the child is abused or neglected. The department shall cooperate with law enforcement officials, courts of competent jurisdiction, and appropriate state agencies providing human services in relation to preventing, identifying, and treating child abuse and neglect; shall provide, enlist, and coordinate the necessary services, directly or through the purchase of services from other agencies and professions; and shall take necessary action to prevent further abuses, to safeguard and enhance the child's welfare, and to preserve family life where possible.

(3) In conducting its investigation, the department shall seek the assistance of and cooperate with law enforcement officials within 24 hours after becoming aware that 1 or more of the following conditions exist:

- (a) Abuse or neglect is the suspected cause of a child's death.
- (b) The child is the victim of suspected sexual abuse or sexual exploitation.

(c) Abuse or neglect resulting in severe physical injury to the child requires medical treatment or hospitalization. For purposes of this subdivision and section 17, “severe physical injury” means brain damage, skull or bone fracture, subdural hemorrhage or hematoma, dislocation, sprains, internal injuries, poisoning, burns, scalds, severe cuts, or any other physical injury that seriously impairs the health or physical well-being of a child.



(d) Law enforcement intervention is necessary for the protection of the child, a department employee, or another person involved in the investigation.

(e) The alleged perpetrator of the child's injury is not a person responsible for the child's health or welfare.

(4) Law enforcement officials shall cooperate with the department in conducting investigations under subsections (1) and (3) and shall comply with sections 5 and 7. The department and law enforcement officials shall conduct investigations in compliance with the protocols adopted and implemented as required by subsection (6).

(5) Involvement of law enforcement officials under this section does not relieve or prevent the department from proceeding with its investigation or treatment if there is reasonable cause to suspect that the child abuse or neglect was committed by a person responsible for the child's health or welfare.

(6) In each county, the prosecuting attorney and the department shall develop and establish procedures for involving law enforcement officials as provided in this section. In each county, the prosecuting attorney and the department shall adopt and implement standard child abuse and neglect investigation and interview protocols using as a model the protocols developed by the governor's task force on children's justice as published in FIA Publication 794 (revised 8-98) and FIA Publication 779 (8-98), or an updated version of those publications.

(7) If there is reasonable cause to suspect that a child in the care of or under the control of a public or private agency, institution, or facility is an abused or neglected child, the agency, institution, or facility shall be investigated by an agency administratively independent of the agency, institution, or facility being investigated. If the investigation produces evidence of a violation of section 145c or sections 520b to 520g of the Michigan penal code, 1931 PA 328, MCL 750.145c and 750.520b to 750.520g, the investigating agency shall transmit a copy of the results of the investigation to the prosecuting attorney of the county in which the agency, institution, or facility is located.

(8) A school or other institution shall cooperate with the department during an investigation of a report of child abuse or neglect. Cooperation includes allowing access to the child without parental consent if access is determined by the department to be necessary to complete the investigation or to prevent abuse or neglect of the child. However, the department shall notify the person responsible for the child's health or welfare about the department's contact with the child at the time or as soon afterward as the person can be reached. The department may delay the notice if the notice would compromise the safety of the child or child's siblings or the integrity of the investigation, but only for the time 1 of those conditions exists.

(9) If the department has contact with a child in a school, all of the following apply:

(a) Before contact with the child, the department investigator shall review with the designated school staff person the department's responsibilities under this act and the investigation procedure.

(b) After contact with the child, the department investigator shall meet with the designated school staff person and the child about the response the department will take as a result of contact with the child. The department may also meet with the designated school staff person without the child present and share additional information the investigator determines may be shared subject to the confidentiality provisions of this act.

(c) Lack of cooperation by the school does not relieve or prevent the department from proceeding with its responsibilities under this act.

(10) A child shall not be subjected to a search at a school that requires the child to remove his or her clothing to expose his buttocks or genitalia or her breasts, buttocks, or genitalia unless the department has obtained an order from a court of competent jurisdiction permitting such a search. If the access occurs within a hospital, the investigation shall be conducted so as not to interfere with the medical treatment of the child or other patients.

(11) The department shall enter each report made under this act that is the subject of a field investigation into the CPSI system. The department shall maintain a report entered on the CPSI system as required by this subsection until the child about whom the investigation is made is 18 years old or until 10 years after the investigation is commenced, whichever is later, or, if the case is classified as a central registry case, until the department receives reliable information that the perpetrator of the abuse or neglect is dead. Unless made public as specified information released under section 7d, a report that is maintained on the CPSI system is confidential and is not subject to the disclosure requirements of the freedom of information act, 1976 PA 442, MCL 15.231 to 15.246.

(12) After completing a field investigation and based on its results, the department shall determine in which single category, prescribed by section 8d, to classify the allegation of child abuse or neglect.

(13) Except as provided in subsection (14), upon completion of the investigation by the local law enforcement agency or the department, the law enforcement agency or department may inform the person who made the report as to the disposition of the report.

(14) If the person who made the report is mandated to report under section 3, upon completion of the investigation by the department, the department shall inform the person in writing as to the disposition of the case and shall include in the information at least all of the following:

(a) What determination the department made under subsection (12) and the rationale for that decision.

(b) Whether legal action was commenced and, if so, the nature of that action.



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(c) Notification that the information being conveyed is confidential.

(15) Information sent under subsection (14) shall not include personally identifying information for a person named in a report or record made under this act.

(16) Unless section 5 of chapter XII of the probate code of 1939, 1939 PA 288, MCL 712.5, requires a physician to report to the department, the surrender of a newborn in compliance with chapter XII of the probate code of 1939, 1939 PA 288, MCL 712.1 to 712.20, is not reasonable cause to suspect child abuse or neglect and, therefore, is not subject to the section 3 reporting requirement. This subsection does not apply to circumstances that arise on or after the date that chapter XII of the probate code of 1939, 1939 PA 288, MCL 712.1 to 712.20, is repealed.

Enacting section 1. This amendatory act takes effect January 1, 2001.

Enacting section 2. This amendatory act does not take effect unless Senate Bill No. 1052 of the 90th Legislature is enacted into law.

This act is ordered to take immediate effect.

Carol Morey Viventi

Secretary of the Senate.

Sam E. Randall

Clerk of the House of Representatives.

Approved

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Governor.



TRAINING OPTIONS FOR SAFE DELIVERY

- Safe delivery training plan:
 - A web-based training for emergency service providers and adoption agencies may be available in the future when funding can be secured.
 - Sample training outline in the handbook.
- PowerPoint presentation on Safe Delivery of Newborns law will be available in 2006 at the Department of Human Services Web site (www.michigan.gov/dhs) and will provide a model that can be used to provide staff training.
- A list of children's services staff from around the state that participated in the Safe Delivery Train-the-Trainers session is available on the Safe Delivery Web site at www.michigan.gov/dhs or call the professional hotline.
- Contact the professional hotline: 1-517-324-7330



TRAINING OPTIONS FOR SAFE DELIVERY

SAFE DELIVERY OF NEWBORNS SAMPLE TRAINING OUTLINE FOR EMERGENCY SERVICE PROVIDERS (ESP)

- I. Introductions
 - a. Trainer(s)
 - b. Participants
- II. Why was the Safe Delivery of Newborns Law Enacted?
 - a. Intent of law
 - b. Review Public Acts 232 and 233
- III. Michigan Data
 - a. Safe Delivery Fact Sheet (DHS Web site: www.michigan.gov/dhs)
- IV. Roles and Responsibilities of the ESP
 - a. Reference *Response and Resource Handbook*
 - b. Play training DVD from handbook
 - c. Discuss Forms and Publications for the Surrendering Parent(s):
 - 1. Surrendering Parent Rights (DHS Pub 866)
 - 2. Safe Delivery Program FACT Sheet (DHS Pub 867)
 - 3. Voluntary Medical Background (DHS Form 4819)
 - 4. Voluntary Release for Adoption (DHS Form 4820)
 - d. Public Awareness
 - 1. What am I going to do?
 - 2. Safe Delivery poster
 - 3. Building signage
- V. Agency Policy and Procedures
 - a. Safe Delivery Surrender Checklist
 - b. Sample protocol or local agency protocol and flowcharts
 - c. Local referral sources
 - d. Frequently Asked Questions
- VI. Safe Delivery Forms and Publications
 - a. Where to order forms and publications
- VII. Role Play Required Actions for a Surrendered Newborn
- VIII. Questions and Answers

Course Preparation

Equipment:

TV/DVD player
PSA/DVD

Handouts:

- 1. Safe Delivery Law
- 2. Fact Sheet
- 3. Forms & Publications
- 4. Checklist
- 5. Local Protocols/SOG
- 6. Flowcharts
- 7. Local Referral Sources
- 8. Frequently Asked Questions



“The people of Michigan value our most important resource, our children, who are the foundation and future of the Great Lakes State.”

~ as stated by Governor Jennifer M. Granholm in Michigan's first Safe Delivery Day Proclamation (April 3, 2006)



The Michigan Department of Human Services

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235 South Grand Avenue
Lansing, MI 48909
www.michigan.gov/dhs

The Michigan Department of Community Health

201 Townsend Street
Lansing, MI 48913
www.michigan.gov/mdch

Michigan Public Health Institute

Child and Adolescent Health Program
2438 Woodlake Circle, Suite 240
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